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CORPORATION ANNUAL REPORT

H & R CONSTRUCTION, INC.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

(9)

FILED Apr 24 1996 8:00 am Secretary of State



| Principal Place of Business Mailing Address | | | | | | | | | | in gran asau sasi |
|---|---|-------------------------|--|-----------------------------|--------|---------------------------------------|--|---------------------------------------|-------------------|---------------------------------|
| | NER AVE STE 10 | | % R.T. ZUKOSKI 5448 HOFFNER AVE STE 101 ORLANDO FL 32812 | | | | | | | |
| ORLANDO FL 32812 | | | OREMIDO TE GENTE | | | | 3. Date Incorporated or Qualified 03/29/1974 | 3a. Date of Last Report 05/01/1995 | | |
| 2. Principal Place of Business | | | 2a. Mailing Address | | | | 4. FEI Number Applied For 59-1787035 Not Applicable | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 59-1/8/US5 Not Applicable \$8.75 Additional | | | |
| Suite, Apr. #, 8tc. | | | Suite, Part. #, etc. | | | | 5. Certificate of Status Desired Fee Required | | | |
| City & State | | | City & State | | | | 6. Election Campaign Financing Trust Fund Contribution 5.00 May Be Added to Fees | | | |
| Zip | Country | 28 | Zip Country | | | · · · · · · · · · · · · · · · · · · · | This corporation has liability for intangible tax under s. 199.032, | | | |
| 24 | 25 29 | | | 30 | | | Florida Statutes | | | |
| | 9. Name and Address of C | urrent Regis | tered Agent | | | | 10. Name and Address of New R | egistered Ager | t | |
| | | | | | 81 | Name | | | | |
| ZUKOSKI, RICHARD T. 5448 HOFFNER AVE., STE 101 ORLANDO FL 32812 | | | | | | Street Addre | ess (P.O. Box Number is Not Acceptable) | | | |
| | | | | | 83 | | | | | |
| | | | | | 84 | City | | 85 | Ti | o Code |
| | | | | | - | Oity | | FL ∣°° | | 3 0000 |
| or registere familiar with | o the provisions of Sections 607 ad agent, or both, in the State on, and accept the obligations of | f Florida, Such | chance was authorize | ed by the | oorp | named corpora xoration's board | ation submits this statement for the pur d of directors. I hereby accept the appr | pose of changing pintment as regis |) its re tered | egistered office agent. I am |
| SIGNATURE _ | Signature, typed or printed name of registers | od agent and title if a | applicable. (NO | TE: Registered | I Ager | nt signature required | when reinstating) | DATE | | |
| 12. | | S AND DIREC | TORS | 13. | | | ADDITIONS/CHANGES TO OFF | ICERS AND DIRE | CTO | RS IN 12 |
| THLE | PSD DELETE | | 1.11 | 1, 1 TITLE | | | Ch. | ange | ☐ Addition | |
| NAME ZUKOSKI (R.T.) | | | 1.21 | | | | • | | | |
| STREET ADDRESS | 10497 CROMWELL GF | rove ter | | 1.3 S | TREET | I ADDRESS | | | | |
| CHTY - ST - ZIP | ORLANDO FL | | | | | ST-ZIP | | | | |
| TITLE | T | ☐ DELÉTE | 2.11 | | | | ☐ Ch | ange | Addition | |
| NAME | ELLIS, PATRICIA | | | 2.2 NAM | | | | | | |
| STREET ADDRESS | 1105 CATALPA LANE | | | | | F ADDRESS | | | | |
| CITY-ST-ZIP | ORLANDO FL | | DELETE | _ | | ST-ZIP | | [] Ch | 2000 | Addition |
| THUE | VD ZUKOSKI, MICHAEL E | | Dotter | 3.11 21N | | | | | zi i i ji G | L] Addition |
| NAME STREET ADDRESS | 40403 ADALBUTH ADALG TERRAGE | | | 3.2 NAME 3.3 STREET ADDRESS | | | | | | |
| | ORLANDO FL | IOTE ILINV | 10 <u>L</u> | | | ST-ZIP | | | | |
| CITY+ST-ZIP TITLE | VIIL NIOV I L | | DELETE | 4.11 | | J) - Ell | | ☐ Ch | ange | Addition |
| NAMÉ | | | <u> </u> | 4.2 N | | | | | - | _ |
| STREET ADDRESS | | | | | | T ADDRESS | | | | • |
| CI1Y - ST - ZIP | | | | | | ST - ZIP | | | | |
| TITLE | <u> </u> | | ☐ DELETE | 5 1 1 | | | | ☐ Ch | ange | Addition |
| NAME | | | | 5 2 N | AME | | | | | |
| STREET ADDRESS | | | | 53S | TREET | 1 ADDRESS | | | | |
| CITY - ST - ZIP | | | | 540 | ITY-S | ST - ZIP | | | | |
| TITLE | | | DELETE | 6 1 1 | ITLE | | | ☐ Ch | ange | Addition |
| NAME | | | | 6.2 N | AME | | | | | |
| STREET ADDRESS | , | | | 6.3 S | TREET | T ADDRESS | | | | |
| | | | | | | | | | | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: