FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #

161

1. Corporation	ND PAVING, INC.	04 (6)					1// 8/8 // 8/8// 8/8// 8/8/
Principal Place	of Business	Mailing Address				# 1101 01011 1/101 1/1/	//: 0:0// Bigif 4/8// 10//
16615 S.W. & MIAMI FL 33		16615 S.W. 83RD AV MIAMI FL 33157	E.				
					3. Date incorporated or Qualified 01/28/1976	3a. Dale of t	Last Report 1/1995
2. Principal Pla 21	ace of Business	2a. Mailing Address			4. FEI Number	L <u>. Y.VI.</u> `	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc			59-1642029		Not Applicable
22		27			5. Certificate of Status Desired	\$	8.75 Additional Fee Required
City & State		Crty & State		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be	
Zip	Country	Zip	Country		8. This corporation has liability for		Added to Fees
24	25	29	30		Florida Statutes 🔀 Yes	i □ No	
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New F	legistered Age	nl
11 H 1A BA	ATRUART	1	81 Na	me			
	. Stewart W 83 avenue	ř	82 Str	eet Addre	ss (P.O. Box Number is Not Acceptat	ole)	
MIAMI FI			83	··- · · · · · · · · · · · · · · · · · ·			
mewal I	L 00101						
			84 Cit	•		FL 8	1 '
SIGNATURE	o the provisions of Sections 607.050, do agent, or both, in the State of Flor h, and accept the obligations of, Sec	Alon boy. 0000, Horida Glattice	5.		tion submits this statement for the put of directors. Thereby accept the app	rpose of changin ointment as regis	g its registered office stered agent. I am
12.		ND DIRECTORS	OTE: Registered Agent squa	there recp inco.	vhor recetaring) ADDITIONS/CHANGES TO OFF	DA'E	OTOFO
TITLE	PTD	DELETE	1 1 TITLE		ADDITIONS/OFFAINGES TO OFF	CERS AND DIRE	
NAME	STEWART, ROBERT II		1.2 NAME			Ü	ange [] Madition
STREET ADDRESS	16615 S W 83RD AVENUE		1 3 STREET ACIDRE	155			
CITY - ST - 7IP	MIAMI, FLORIDA 00000		1.4 C/TY - ST - 7/P				
TIFLE	SD OTCHART HEALA	☐ DELETE	2 1 Trill			☐ Ch	arige 🔲 Addition
NAME STREET ADDRESS	Stewart, Julia M 16615 S w 83RD avenue		2.2 NAME	i			
CITY-ST ZiP	MIAMI, FLORIDA 00000		2.3 STREET ADDRE	SS			
TILE	minni, i comon occoo	DELETE	24 CHY-ST-ZIP 3 1 TITLE			Ch.	ange
NAMé			3.2 NAME				ange 🔲 Addition
STREET ADDRESS			33 STREET ADDR	ess			
CITY-ST-7IP			3 4 CHY+ST-ZIF				
TIFLE		DELETE	4 † THILE			Cha	ange 🔲 Addition
NAME STREET ADDRESS			4.2 NAME				
CITY-ST-ZIP			4.9 STREET ADDRE	SS			
TULE		DELEJE	5 1 TITLE				
NAME		L. otten	5.2 NAME			Cha	ange
STREET ADDRESS			5.3 STREET ADDRE	ss			
CHY-ST-ZIP			5.4 CITY - ST - ZIP				
TITLE		☐ DELETE	6 1 THILE			☐ Cha	enge Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRES	SS			
CITY-S1-ZIP	cedify that the information ownersed	with thin flow is a but of	€ 4 CITY - ST - ZIP		<u> </u>		
oath; that I a		oration or the receiver or truste	uar report is true and a empoviored to eve		the exemption stated in Section 119.6 and that my signature shall have the eport as required by Chapter 607, Flo		

SIGNATURE:

JULIA M. STEWART 4/4/96 305-235-1/85