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CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 512791

(5)

R.C. BOOS CONSTRUCTION, INC. Mailing Address Principal Place of Business 12585 OAK ARBOR LANE 12565 OAK ARBOR LANE BOYNTON BEACH FL 33436-6138 BOYNTON BEACH FL 33436-6138 3. Date incorporated or Qualified Sa. Date of Last Report 09/21/1976 05/29/1996 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 28. 59-1714295 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Added to Fees Trust Fund Contribution Zip Zip Country Country This corporation has liability for intangible tax under s. 199.032, Yes No 29 Florida Statutes 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **BOOS, ROGER** 12565 OAK ARBOR LN Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BEACH FL 33435** 83 RA City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE BOOS, ROGER C. NAM-12 NAME 12565 OAK ARBOR LANE STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BCH FL** 1.4 City-St-ZiP CITY - S1 - ZIP ST DELETE 2.1 TITLE Change Addition TITLE **BOOS, MARCELLA** 2.2 NAME NAME 12565 OAK ARBOR LANE 2.3 STREET ADORESS STREET ADDRESS **BOYNTON BCH FL** 2 4 CITY-ST-ZIP CITY- ST-DELETE Change Addition THILE 31 TITLE NAME 3 2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Addition DELETE 41 TITLE Change THEFF 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition HILE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-S1-7# DELETE Change Addition 61 TITLE THILE 62 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 oath; 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 in hanged, or or an abachment with an address.

6.4 CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

96/6)

FILED

Apr 29 1997 8:00am

Secretary of State