

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 618504

1. Corporation Name

RVM CONSTRUCTION, INC.

Principal Place of Business

315 HUMBERT ST.
PALM BAY FL 32907

Mailing Address

315 HUMBERT ST.
PALM BAY FL 32907

FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90048 047 ***150.00



DO NOT WRITE IN THIS SPACE

| | | | | | |
|--------------------------------|--|------------------------|--|---|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified | |
| 21 Suite, Apt. #, etc. | | 26 Suite, Apt. #, etc. | | 04/23/1979 | |
| 22 City & State | | 27 City & State | | 4. FEI Number | |
| 23 Zip | | 28 Zip | | 59-1937936 | |
| 24 Country | | 29 Country | | 5. Certificate of Status Desired | |
| | | | | 8. Election Campaign Financing | |
| | | | | Trust Fund Contribution | |
| | | | | 9. This corporation owes the current year Intangible | |
| | | | | Personal Property Tax. | |
| | | | | Applied For | |
| | | | | Not Applicable | |
| | | | | \$8.75 Additional Fee Required | |
| | | | | \$5.00 May Be Added to Fees | |
| | | | | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |

9. Name and Address of Current Registered Agent

Vaeth, Irene Nnn
315 Humbert Street
Palm Bay, FL 32907

10. Name and Address of New Registered Agent

81 Name Vaeth, Robert F.
82 Street Address (P.O. Box Number is Not Acceptable) 315 Humbert Street
83
84 City Palm Bay FL 85 Zip Code 32907

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

ROBERT F. VAETH

Robert F. Vaeth

March 29, 1999

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--|---|---|
| TITLE | P <input checked="" type="checkbox"/> DELETE | 1.1 TITLE | P <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Vaeth, Robert F. | 1.2 NAME | Vaeth, Irene Nnn |
| STREET ADDRESS | 315 Humbert Street | 1.3 STREET ADDRESS | 315 Humbert Street |
| CITY-ST-ZIP | Palm Bay, FL 32907 | 1.4 CITY-ST-ZIP | Palm Bay, FL 32907 |
| TITLE | <input type="checkbox"/> DELETE | 2.1 TITLE | SECRETARY |
| NAME | Michael F Vaeth | 2.2 NAME | MICHAEL F. VAETH |
| STREET ADDRESS | 1140 Yakutat Ave SE | 2.3 STREET ADDRESS | 1140 YAKUTAT AVE SE |
| CITY-ST-ZIP | Palm Bay FL 32909 | 2.4 CITY-ST-ZIP | PALM BAY FL 32909 |
| TITLE | <input type="checkbox"/> DELETE | 3.1 TITLE | |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

14. I 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 if changed, or on an attachment with an affidavit, with all other like empowered.

SIGNATURE:

Irene Nnn Vaeth

MAR 1, 1999

407-984-7357

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

CR2E034 (11/98)