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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 626368

FILED Feb 13 1998 8:00am Secretary of State

	TT BROTHERS CONSTRUC		C.			
Principal Place		Mailing Address		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1 OCEAN WEST BLVD UNIT 21A8 DAYTONA BEACH SHORES FL 32118		1 OCEAN WEST BLVD UNIT 21A6	4	-		
		DAYTONA BEACH SHORES FL 32118		DO NOT WRITE IN THIS SPACE		
US		US		3. Date Incorporated or Qualified 06/13/1979		
2. Principal Pl	lace of Business	2a, Mailing Address		4. FEI Number		Applied For
21		26		59-1913801		Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		5, Certificate of Status Desired	11 '	.75 Additional se Required
City & Stati	0	City & State		6. Election Campaign Financing		.00 May Be
23		[28]		Trust Fund Contribution		Ided to Fees
Zıp	Country	Zφ	Country	8. This corporation owes or has p		ar Intangible
24	25	[29]	30	Personal Property Tax due Jun		□ No_
	9. Name and Address of Curren	nt Registered Agent	81 Name	10. Name and Address of New R	legistered Agent	
BENNETT, LISTON E 734 BIG TREE ROAD SOUTH DAYTONA, FL 32019		83 CEAN		ess (P.O. Box Number is Not Acceptable) NS WEST BLVD, UNIT 21A6		
			84 City DAYTON	A BEACH SHORES	FL 85	Zip Code 32118-5931
office or re	egistered agent y both, in the state	of Horida, Such change was	s authorized by the corpora	tion's board of directors. I hereby according	ept the appointme	nt as registered
SIGNATURE (Saybabae Wash or probed bare of any ferest age OFFICERS ANI	erzent blie Capsilicable (NO DIDIRECTORS	Liston E. Benne Off Registered Agent signature requi	poration submits this statement for the tion's board of directors. I hereby acco- ett, Secretary ared when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECT	CTORS IN 12
SIGNATURE C	Adjustice Mast or Legel Transco, and recording	er aout plie tays is able (N	Liston E. Benne OIL Registered Agent signature requi	ett, Secretary ired when reinstating)	2 - 9 - DATE	CTORS IN 12
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ed with this filing does not qualify for the exemption stated in Section 119.07(3)(t). Florida Statutes. I further certify that the information certify among report is true and accurate and that my signature shall have he same legal effect as if made under oath; that I am an receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

1-16-98