FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 26 1998 8:00am Secretary of State

					→	
DOCUI	MENT # 64342	2 (9)				
1	ONTRACTORS, INC.	•				
					r abbind minit ordan alkar mema dibing sida dibin di	DEN BYÐUN BUÐUN ÞÁÐUN ÐUÐUN AÐÐU
Principal Place of Business Mailing Address					- 148414 81114 61849 14111 61819 41818 4191 81811 914	tir Bratt Bibti Siait Bifit ind:
890 N. FEDERAL HIGHWAY APT 104 P.O. BOX 3001					1	
LATANA FL 33462 LANTANA FL 33465 US US				DO NOT WRITE IN THE	S SPACE	
					3. Date Incorporated or Qualified	
		2a. Mailing Address			10/30/1979	
2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c.					4. FEI Number	Applied For Not Applicable
Suite, Apt. #, etc. Suito, Apt. #, etc.					59-1953962	\$8.75 Additional
22 27					5. Certificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23	Country	28		40.	Trust Fund Contribution	Added to Fees
Zip 24	25	29 29	Coun	in y	This corporation owes or has paid the c Personal Property Tax due June 30.	urrent year Intangible Yes □ No
<u> 47 </u>	9. Name and Address of Curre		[50]		10. Name and Address of New Registere	<u> </u>
FLE	CK, WILLIAM A. ESQ			Name		
	O NO FEDERAL HIGHWAY		Ē	Street Add	lress (P.O. Box Number is Not Acceptable)	,
LAH	KE WORTH FL 33460		},	33		
			[6	City	F	85 Zip Code
11. Pursuani t	to the provisions of Sections 607.050	02 and 607.1508, Florida Statu	ites, the abo	ove-named cor	poration submits this statement for the purpose ation's board of directors. I hereby accept the ap	
office or re agent. I ar	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was _l ations of, Section 607.05 05 , F	authorized Iorida Statu	by the corpora tes.	ation's board of directors. I hereby accept the ap	ppointment as registered
SIGNATURE						
12.	Signature, typiid or printed name of registered ag	ion and title if applicable (NC ND DIRECTORS	TE: Registered /	Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	P DELETE		1.1 1([]	£ T	ADDITIONS/CHANGES TO OTTOCHS AL	Change Addition
NAME	PUOLIMATKA, RAUNO		1.2 NAM	AE		ì
STREET ADDRESS	896 N. FEDERAL HWY.		1.3 STR	EET ADDRESS		i d
CITY-ST-ZIP	LANTANA FL	T Street		r-ST-ZIP		
TITLE	S DIANA F. JACKSON		21 TITU			Change Addition
NAME Street Address	896 N. FEDERAL HWY # 125	5	2.2 NAM	EET ADDRESS		
CITY-ST-ZIP	LATANA FL	•		Y-ST-ZIP		
TITLE	DELETE		3.1 TITLI			Change Addition
NAME			3.2 NAM	1E		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY 4.1 TITU	Y-\$1-ZIP		☐ Change ☐ Addition
NAME		La becció	4. 2 NAM	1		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP			4.4 CITY	- ST - ZIP		
TITLE		DELETE	5.1 TITL	E		Change Addition
NAME			5.2 NAM			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY 6.1 TITLE	-ST-ZIP		☐ Change ☐ Addition
NAME	•	المراجعة الم	6.2 NAM			
STREET ADDRESS		* ·		ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
	ertify that the information supplied w	vith this filing does not qualify			Section 119.07(3)(i), Florida Statutes, I further of	ertify that the information

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 frue 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 Irrustee 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.

3/4/00

J11 J22 4647