FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED** FLORIDA DEPARTMENT OF STATE Jan 20 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 648601 (3)SHEFFIELD CONSTRUCTION CO., INC. Principal Place of Business Mailing Address 504 N.E. 5TH AVE 1170 HILLSBORO MILE DELRAY BEACH FL 33483 SUITE 101 DO NOT WRITE IN THIS SPACE HILLSBORO BCH, FL 33062 US 3. Date Incorporated or Qualified 12/18/1979 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2037436 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing **\$5.00** May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DE LALLA, JAMES 1170 HILLSBORO MILE 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 101 HILLSBORO BCH. FL 33062 83 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 little if applicable, (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change . Addition DELALLA, VINCENT NAME 1.2 NAME 1170 HILLSBORO MILE STREET ADDRESS 1,3 STREET ADDRESS HILLSBORO BCH. FL CITY - ST - ZIP 1.4 CITY-ST-ZIP **VPD** TITLE DELETE 2.1 TITLE Addition SCHWED, WILLIAM G. NAME 2.2 NAME 1170 HILLSBORO MILE, APT. 101 STREET ADDRESS 2.3 STREET ADDRESS HILLSBORO BCH. FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition DELALLA, JAMES NAME 3.2 NAME 1170 HILLSBORO MILE, APT, 101 STREET ADDRESS 3.3 STREET ADDRESS HILLSBORO BCH. FL 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition 4. 2 NAME NAME

14. I hereby certify that the information supplied with this filling 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 by 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 corpy attorn or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapted, or or an attachment with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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5.4 CITY-ST-ZIP

4.4 CITY - ST-ZIP

5.1 TITLE

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6.1 TITLE

6.2 NAME

☐ DELETE

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SIGNATURE:

STREET ADDRESS CITY - ST - ZIP

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