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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 817488

(0)

HAHN CONTRACTING CO.

FILED
Apr 10 1997 8:00am
Secretary of State

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BIRDSBORO P	rincipal Place of Business Mailing Address DUTE 422. EAST O. BOX 38 RDSBORO PA 19508 Mailing Address ROUTE 422. EAST P.O. BOX 38 BIRDSBORO PA 19508-0038					3. Date Incorporated or Qualified 3a. Date of Last Report					
							11/19/1963	quamou	05/01/		орон
2. Principal I	Place of Business	2a.	Mailing Address				4. FEI Number		00/01/		oplied For
21		26					23-1543359				ot Applicable
Suite, Apt	#, etc.		Suite, Apt #, etc.				5. Certificate of Status D	acirod 1	5	8.75	Additional
22		27					o. Continuate of Status D	081100 4		Fee Re	quired
City & Sta	ile		City & State				6. Election Campaign Fir				May Be
23		28	7	T 0-			Trust Fund Contribution			Added t	***************************************
Zip TT	Country		Zip		untry		 This corporation has line Florida Statutes 		angible tax Yes 🛣 N		. 199.032,
24	25 9. Name and Address of Curre	29	tered Agent	30	1		10. Name and Address of				
		· · · · · · · · · · · · · · · · · · ·	10.00 1.8111		81	Name	10				
	CORPORATION SYSTEM							.,			
	00 S. PINE ISLAND ROAD ANTATION FL 33324				82	Street Ad	ddress (P.O. Box Number is Not	l Acceptable)		
FLA	ANTAHON FL 55524				83	L					
											
					84	City			FL	5 Zip (Code
SIGNATURE	Signature: Typed or prefer have of registered at UFFICERS AI		CTORS	OTE Registere		ent signature re	quired when reinstating) ADDITIONS/CHANGES	TO OFFICE			RS IN 12
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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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/0/97

610-502-8185