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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 30, 1999 8:00 am Secretary of State 03-30-1999 90011 022 ***158.75

	·	1999	DIVISION OF COR	roivi			03-30-1777	20011 02	150	. 1 5	
١.	Corporation	MENT # 836683 ONSTRUCTION CORPORAT	ION								
Pri	ncipal Place	of Business	Mailing Address							91911 97917 (20)	
3820 3RD AVENUE SOUTH 3820 3RD AVENUE SOUTH					•	-	استندار بدالبد				
BIRMINGHAM AL 35222 BIRMINGHAM AL 35222											
"							DO NOT WRI	TE IN THIS	SPACE		
							 Date Incorporated or Qualifed 07/14/1976 				
. 2.,	Principal Pla	ace of Business	=2a_Mailing Address				4=FEI:Number			pplied For	=
21			26				63-0648909		No	t Applicable	
_	Suite, Apt.	#, etc.	Suite, Apt. #, etc.	te, Apt. #, etc.			E Cartifonto of Status Doginal	×	\$8.75	Additional	
22			27	7			5. Certifcate of Status Desired	γ.	Fee Re	equired	Ì
	City & State						6. Election Campaign Financing		\$5.00	May Be	
23	,		28				Trust Fund Contribution			to Fees	
	Zip	Country Zip Cou					8. This corporation owes the curr	ent vear Inta	ngible]
24	P	25 29 30					Personal Property Tax.	•,	☐Yes	□No	Ì
241	9. Name and Address of Current Registered Agent						10. Name and Address of New I	Registered A	Agent		1
-				81	Name						1
	CT C	ORPORATION SYSTEM									
1200 S. PINE ISLAND ROAD				82	Street A	ddres	s (P.O. Box Number is Not Accepte	able)			
		ITATION FL 33324									┨
	r L-u	TATION I E 35324		83							1
ĺ		•		84	City				85 Zip	Code	İ
)					'			FL			
	office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State on familiar with, and accept the obligation	if Florida. Such change was sutho	nzed by	the corpoi	corpor ration	ation submits this statement for the s board of directors. I hereby acce	pt the appoil	changing its itment as re	registered egistered	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regist					nt signature rec	quired w	hen reinstating)	DATE			1 6
12		OFFICERS AND		13.			ADDITIONS/CHANGES TO OF	FICERS AN			{
m	E	SD	☐ DELETE	1.1 TITLE					Change	☐ Addition	3
NAM	ΛE	11111 122, 007 4 4 4 5.		1.2 NAME							3
STF	REET ADDRESS 3820 3RD AVENUE SOUTH			1.3 STREE	T ADDRESS	;				إ	
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	1	BARR, JAMES R		3.2 NAME							}
NAS				1							ļ
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CIT	CITY-ST-ZIP BIRMINGHAM AL			3.4. CITY-ST-ZIP					F7.05	Addition	{
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STREET ADDRESS				4.3 STREET]
CITY-ST-ZIP				4.4 CITY-5	ST-ZIP						1
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NAM			1	5.2 NAME							
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	Y-ST-ZIP			6.1 TITLE	-	•			Change	☐ Addition	1
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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 address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP