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Feb 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 845952 (1)

1. Corporation Name
SGB CONSTRUCTION SERVICES, INC.

Principal Place of Business
14942 TALCOTT
HOUSTON TX 77015

Mailing Address
14942 TALCOTT
HOUSTON TX 77015-6509



3. Date Incorporated or Qualified 05/08/1980
3a. Date of Last Report 04/23/1996

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country
30

4. FEI Number 36-3068391
Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code FL

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 title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DC	<input type="checkbox"/> DELETE
NAME	BARRETT, JOHN	
STREET ADDRESS	23 WILLOW LN.	
CITY - ST - ZIP	MITCHAM SU	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	BUTTERFIELD, PETER	
STREET ADDRESS	14942 TALCOTT	
CITY - ST - ZIP	HOUSTON TX	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MANSELL, KEN	
STREET ADDRESS	23 WILLOW LN.	
CITY - ST - ZIP	MITCHAM SU	
TITLE	S	<input type="checkbox"/> DELETE
NAME	GRIFFIN, WADE O	
STREET ADDRESS	14942 TALCOTT	
CITY - ST - ZIP	HOUSTON TX	
TITLE	DAS	<input type="checkbox"/> DELETE
NAME	NIXON, GEORGE	
STREET ADDRESS	14942 TALCOTT	
CITY - ST - ZIP	HOUSTON TX	
TITLE	T	<input type="checkbox"/> DELETE
NAME	MCQUESTON, GEORGE	
STREET ADDRESS	14942 TALCOTT	
CITY - ST - ZIP	HOUSTON TX	

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-27-97 (281) 452-1600
Date Daytime Phone #

CR2E034 (9/96)