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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVIDION OF CORROBATIONS

1999	DIVISION OF	DIVISION OF CORPORATIONS			04-20-1999 90221 037 ***150.00			
n Name					1			
RBUS BROS. CONSTR	RUCTION CO.							
e of Business	Mailing Address						***** BIBIL 1991	
517 SHEPHERD DRIVE 617 SHEPHERD DRIVE								
H 45215	CINCINNATI OH 45215				DO NOT WRITE IN THIS S	PACE		
						AUL		
Place of Business	2a. Mailing Address				4. FEI Number	P	Applied For	
	26				31-0643128	1	Not Applicable	
. #, etc.	Suite, Apt. #, etc.				E Cartifecto of Status Desired	\$8.75	Additional	
	27			_	5. Certificate of Status Desired	Fee F	Required	
te ====================================	City & State				6. Election Campaign Financing		0 May Be	
·	28				Trust Fund Contribution		to Fees	
	<b>├</b>	_	untry		1 .		□No	
		30	т		1 Grooman : roponty : ann			
9. Name and Address of	Current Registered Agent	·	81	Name	To. Hallie and Address of Non Registered A	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
CORPORATION SYSTEM				<u> </u>				
O S. PINE ISLAND ROAD			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
NTATION FL 33324			83					
			84	City	FL	85   ZIF	Code	
am familiar with, and accept th	607.0502 and 607.1508, Ftorida Stat le State of Florida. Such change was le obligations of, Section 607.0505, F	utes, the a authorize lorida Sta	above d by tutes	e-named corporation	oration submits this statement for the purpose of cl on's board of directors. I hereby accept the appoint	nanging i ment as	ts registered registered	
Signature, typed or printed name of regi				it signature required	d when reinstating) DATE	DIDECT	CORD IN 40	
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A47 CHENHERD DD	,						]	
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RUDY, GERBUS							i	
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CINCINNATI OH		3.4.	CITY-S	ST-ZIP				
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	MENT # 8492 RBUS BROS. CONSTI	MENT # 849218  PRBUS BROS. CONSTRUCTION CO.  The of Business Mailing Address Mailing Mailing Address Mailing Mailing Address Mailing Mailing Mailing Address Mailing M	MENT # 849218 on Name RBUS BROS. CONSTRUCTION CO.  The of Business Mailing Address D DRIVE 617 SHEPHERD DRIVE CINCINNATI OH 45215  Place of Business 26  The country 27  The Country 37  The C	MENT # 849218  IN Name  IRBUS BROS. CONSTRUCTION CO.  IDENTIFY SHEPHERD DRIVE  CONSTRUCTION CO.  IDENTIFY SHEPHERD DRIVE  CINCINNATI OH  Suite, Apt. #, etc.  28  COUNTRY  Zip  COUNTRY  AB1  CORPORATION SYSTEM  OS. PINE ISLAND ROAD  NTATION FL 33324  B3  B4  A5  A6  CEO  GERBUS, RUDY J.  GIFTCERS AND DIRECTORS  CEO  GERBUS, RUDY J.  B1  CEO  GERBUS, RUDY J.  B1  CEO  GERBUS, RUDY J.  B1  CEO  GERBUS, ROBERT E.  B1  CINCINNATI OH  DELETE  21 ITTLE  22 NAME  23 STREE  CINCINNATI OH  DELETE  31 STREE  CINCINNATI OH  DELETE  41 TITLE  ACTIVE  A	MENT # 849218  IRBUS BROS. CONSTRUCTION CO.  Mailing Address D DRIVE 617 SHEPHERD DRIVE CINCINNATI OH 45215  Place of Business  Za. Mailing Address 26 Suite, Apt. #, etc. 27 City. & State  Country 25 29 30  9. Name and Address of Current Registered Agent  CORPORATION SYSTEM 0 S. PINE ISLAND ROAD NTATION FL 33324  83 BA City  It to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corp registered agent, or both, in the State of Florida, Such change was authorized by the corporate and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS  CEO GERBUS, RUDY J. 617 SHEPHERD DR. CINCINNATI OH  P GERBUS, ROBERT E. 617 SHEPHERD DR. CINCINNATI OH  S CINCINNATI OH  S CINCINNATI OH  DELETE 1.1 TITLE 22 NAME 23 STREET ADORESS 1.4 CITY-ST-ZP 31 TITLE 32 NAME 31 STREET ADORESS	MENT # 849218 on Name RBUS BROS. CONSTRUCTION CO.  A STATE PHERD DAIVE CINCINNATI CH 45215  DO NOT WRITE IN THIS S  3. Date Incorporated or Qualified 05/22/1981  DO NOT WRITE IN THIS S  3. Date Incorporated or Qualified 05/22/1981  DO NOT WRITE IN THIS S  3. Date Incorporated or Qualified 05/22/1981  DO NOT WRITE IN THIS S  3. Date Incorporated or Qualified 05/22/1981  DO NOT WRITE IN THIS S  3. Date Incorporated or Qualified 05/22/1981  DO NOT WRITE IN THIS S  3. Date Incorporated or Qualified 05/22/1981  Suite, Apt. #, etc.  27  Country  28  Country  29  Country  29  29  Country  21  Country  21  Enter Fund Contribution  Trust Fund Contribution  To Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  CORPORATION SYSTEM 0 S. PINE ISLAND ROAD  NTATION FL 33324  B1 Name  20 Street Address (P.O. Box Number is Not Acceptable)  B2 Street Address (P.O. Box Number is Not Acceptable)  B3 City  FL  1 to the provisions of Section 607.0502 and 607.1508, Fibride Statutes, the above-earned corporation submits this statement for the purpose of City  B3 City  FL  1 to the provisions of Section 607.0502 and 607.1508, Fibride Statutes, the above-earned corporation submits this statement for the purpose of City  B3 City  FL  1 to the provisions of Section 607.0502 and 607.1508, Fibride Statutes, the above-earned corporation submits this statement for the purpose of City  B3 City  FL  1 to the provisions of Section 607.0502 and 607.1508, Fibride Statutes, the above-earned corporation submits this statement for the purpose of City  B3 City  FL  1 to the provisions of Section 607.0502 and 607.1508, Fibride Statutes, the above-earned corporation submits this statement for the purpose of City  B4 City  FL  1 to the provisions of Section 607.0505, Fibride Statutes, the above-earned corporation submits this statement for the purpose of City  B4 City  B4 City  B5 City  B5 City  B5 City  B5 City  B6 City	MEINT # 849218  The land the l	

CITY-ST-ZIP 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 on an attachment with an address, with all other like empowered.

6.4 CITY+ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

PEQUIRED

FILED Apr 20, 1999 8:00 am Secretary of State