## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name F18617

(3)

ALOE BUILDERS, INC.

Principal Place % CONSTAN 999 S.W. 8TH BOCA RATOL	ITINE S SZEJKO H STREET	999 S.W. 8TH STREE	% Constantine s szejko 999 s.w. Bth street Boca Raton FL 33486							
						3. Date Incorporated or Qualified 02/06/1981	02/06/1981 01/26/1995			
_2. Principal Pla 21	Place of Business 28. Mailing Address 26					F0 0000707			Applied For	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						Not Applicable  \$8.75 Additional		
22		27	27			5. Certificate of Status Desired Fee Required				
City & State	9	City & State	_ <del> </del>			6. Election Campaign Financing \$5.00 May Be				
<b>23</b> Zip	Country	28 Zrp		unin.		Trust Fund Contribution	<del></del> -		ed to Fees	
24				untry		This corporation has liability for in     Florida Statutes  Yes	. •	. under s	199.032,	
I. I	9. Name and Address of Curre	··· · k al	30	T		10. Name and Address of New Ro		gent.		
				Bi	Name					
SZEJKO, CONSTANTINE S					Street Add	ress (P.O. Box Number is Not Acceptable	6)			
	12TH TERRACE									
BOCA R	VATON FL 33432			83						
				84	City			85 Z	ip Code	
44 5			<del> </del>	Ш		ration submits this statement for the purp	<u>FL</u>	<u> </u>		
<b>12.</b> TILLE	PST	ND DIRECTORS  DELETE	13.		signature regione	od when reinstating! ADDITIONS/CHANGES TO OFF!		DIRECTO	ORS IN 12	
NAME	SZEJKO, CONSTANTINE		1.2 N	AME			_		<b>D</b>	
STREET AUDRESS	999 S.W. 8TH STREET		1.3 S	TREET	ADDRES\$					
City-St_ziF	BOCA RATON FL.			ITY-ST	- ZIP		14.0			
TILLE	D CZEJIZO COMETANTINE	DELFTE	2 1 7					] Change	☐ Addition	
NAME Contractors	SZEJKO, CONSTANTINE 999 S.W. 8TH STREET		22 N							
STREET ADDRESS CITY+ST-ZIP	BOCA RATON FL.			THEET A	ADDRESS	•				
THEF		☐ DELETE	3 11		- 211		Г	Change	☐ Addition	
NAME		_	3 2 N	AME	l		-			
STREET ADDRESS			338	STREET	ADDRESS					
CITY-ST-ZIP			340	ITY-ST	- ZIP					
DT.E		DELETE	4 1 !	EITLE				Change	Addition	
NAME			4.2 N							
STREET ADDRESS					ADDRESS					
GITY - ST- ZIP TITLE		T) DELETE	4.4 C	ITY-SI	- ZIP			Change	Addition	
NAME		[] berry	5.1 N				<u> </u>	Criange	[] Automort	
STREET ADDRESS					ADDRESS					
ČLTV - ST - ZIP			•	ITY-ST						
THEF		DELFTE	6 1 T					Change	Addition	
NAME			6 2 N	AME						
STREET ADDRESS			6.3 S	TREET A	ADDRESS					
CF v - ST - ZIP	L		64C	ITY-ST	- ZIP					
certify that oath; that	t the information indicated on this and	iual report or supplemental and oration or the receiver or trusti	nual report i se empowe	is true	e and accura	for the exemption stated in Section 119.0 ate and that my signature shall have the s is report as required by Chapter 607, Flo	a tenat ames	ffact ac i	if made under	

**SIGNATURE:** 

Censuline SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIN