

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

FILED
Apr 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F21258 (1)
1. Corporation Name
MADRA CONSTRUCTION CO., INC.

Principal Place of Business
4531-26TH AVE. S.W.
NAPLES FL 33999

Mailing Address
4531-26TH AVE. S.W.
NAPLES FL 33999



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 139 PALMETTO DUNES CR Suite, Apt. #, etc. 22 City & State 23 NAPLES FL Zip 24 34113		2a. Mailing Address 26 139 PALMETTO DUNES CR Suite, Apt. #, etc. 27 City & State 28 NAPLES FL Zip 29 34113		3. Date Incorporated or Qualified 02/26/1981	
				4. FEI Number 59-2072252	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent PELOQUIN, ROBERT E. 4531 26TH AVE SW NAPLES FL 33999		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 139 PALMETTO DUNES CR 83 84 City NAPLES FL 85 Zip Code 34113	
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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 R. Pelquin 4-1-98
Signature, typed or printed name of the 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	PD	1.1 TITLE	
NAME	PELOQUIN, ROBERT E	1.2 NAME	
STREET ADDRESS	4531-26TH AVE. S.W.	1.3 STREET ADDRESS	139 PALMETTO DUNES CR
CITY-ST-ZIP	NAPLES, FL 00000	1.4 CITY-ST-ZIP	NAPLES FL 34113
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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, or on an attachment with an address

SIGNATURE: R. Pelquin 4-1-98 9A1 7321986

CR2E034 (10/97)