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

PROFIT CORPORATION ANNUAL REPORT

1997

P.O. BOX 5341 **LAKELAND FL 33813-3785**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F33227

(2)

LAKELAND FL 33813-3785

O & M GEI

O & M GENERAL CONTRAC	TOHS, INC.	
Principal Place of Business	Mailing Address	I COUNTRY THEO HARBAND FALLS AND CHAILS AND THE STAIL BEACH BIRLY
6005 PIER PLACE DR. P.O. BOX 5341	8005 PIER PLACE DR. P.O. BOX 5341	

Principal Place of Business 2a. Mailing Address					04/24/1981	03/18/1996				
						4. FEI Number		plied For		
21		26	26			59-2091141 Not Ar			t Applicabl	
		Suite, Apt. #, etc.	ot. #, etc.		5. Certificate of Status Desire	a []	\$8.75 /	Additional		
27						• Certificate of Status Desire	, LJ	Fee Re	quired	
City & Stat	6	City & State				6. Election Campaign Financi	ng	\$5.00	May Be	
3	28				Trust Fund Contribution Added to Fees				to Fees	
Zip	Country	Zip	Cou	intry		8. This corporation has fiabilit			199.032,	
1	25 29 30				Florida Statutes Yes X No					
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of Ne	w Register	ed Agent		
MAS, BENITO					81 Name					
6005 PIER PLACE DR.					82 Street Address (P.O. Box Number is Not Acceptable)					
LAKELAND FL 33813			5treet Address (F.O. Box Number is Not Acceptable)							
				83		· · · · · · · · · · · · · · · · · · ·				
				-						
					City		F	<u>L </u>	Code —————	
1. Pursuant	to the provisions of Sections 607.05 egistered agent, or both, in the State	02 and 607.1508, Florida State	utes, the a	bove-	named corp	oration submits this statement for	the purpose	e of changing its	s registered	
agent La	m familiar with, and accept the oblig	jations of, Section 607.0505, I	Florida Sta	tutes.	nie corporat	long board of directors. I hereby	accept the a	appointment as	registered	
BIGNATURE										
norwino il	Signative type the printed name of registered ag	ent and title it applicable (No	OTE: Registere	d Agen	t signature requir	ad when reinstating)	DAT			
2.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO (OFFICERS A		S IN 12	
TLE	PD	☐ DELETE	1.11	TLE	}			Change	Additi	
4MF	MAS, BENITO L		1.2 N	AME						
TREET ADDRESS	6005 PIER PLACE DR.		1.3 S	TREET A	ADDRESS					
(TY - \$1 - 7)P	LAKELAND, FLORIDA 00000		1.40	TY-ST	-ZIP					
II.E	DV DELETE		2.1 T	2.1 TITLE				Change	Additi	
AME	OLIVERA, FELIPE J		2.2 N	iAME	Ī					
TREET ADORESS	6739 CRESCENT LAKE DRIVE		2.3 S	TREET A	UDDRESS					
ITY - ST - ZIP			240	CHY-SI	- 7IP					
ii.f	DT DELETE			31 TITLE			 	Change	Additi	
IAME	MAS, LILLIAM R		- 1	32 NAME				- •		
TREET ADDRESS	6005 PIER PLACE DR.			3.3 STREET ADDRESS						
UTY+ST-ZIP	LAKELAND, FLORIDA 00000			DITY-ST	- 1					
HTF MT+20+70	DS DS	DELETE	4.11		1-21P			Change	Additio	
IAME	OLIVERA, ALICIA M.	hand Dittiff		NAME	ı			- outling		
	6739 CRESCENT LAKE DRIVE	!			Induced					
STREET AODRESS	LAKELAND, FL 00000	1	•		ADDRESS					
HTY - \$1 - 2161	LANCLAND, FL WWW	T or ore		ITY-ST	- ZIP	· · · · · · · · · · · · · · · · · · ·		1 0	1400	
IILE		DELETE	517		{			Change	Additio	
IAMí:			5.2 N							
TREET ACORESS			5.3 \$	TREET A	ADDAESS (
atr - \$1 - 20	.,			ITY-ST	- 7IP					
ITLE		DELETE 6.1		TLE				Change	Addition	
IAME			6.2 N	IAME						
TREET ADDRESS	}		638	TREET	ADDRESS.					
DITY - ST - ZIP			640	HY-ST	- ZIP					
4. I do here	by certify that the information supplied in indicated on this annual report or	ed with this filing does not qua	alify for the	exen	nption stated	in Section 119.07(3)(i), Florida S	atutes. I fur	ther certify that	the	
in o mate	on indicated on this annual report or officer or director of the corporation of	suppliemontal annual report is or the receiver of trustee empo	owered to	exect exect	iale and that ite this renoi	rt as required by Chapter 607. Flo	rida Statute:	a as ir niade un s: and that my r	uer oain; ir Name	

SIGNATURE:

WAL PEQUIRED

FILED

Apr 02 1997 8:00am

Secretary of State

3a. Date of Last Report

3. Date Incorporated or Qualified