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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUN 1. Constration	MENT # F3679								
	CONSTR. CO., INC.								
Principal Place	of Business	Maling Address				BAM UFON BADI	I DATA DI BARA	4;011 B;011 1001	
5481 ROYAL PALM BEACH BLVD 14766 RANCHWOOD COURT ROYAL PALM BEACH FL 33411		C/O HARRY & ELYSE TANNEN 14766 RANCHWOOD COURT WEST PALM BEACH FL 33414							
US	DENOTITE SOAT	VIEGI I NEW DENGIT	L 30414		 Date Incorporated or Qualified 06/01/1981 	3a. Date 01	of Last Re /26/199		
2. Principat Pia 21	ce of Business	2a. Mailing Address 26			FO 0404000			Applied For Not Applicable	-
Suite, Apt. #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			1
City & State		City & State			Election Campaign Financing Trust Fund Contribution			D May Be d to Fees	
7 ₍₁₎	Country 25	Zq:	Goun	Iry	This corporation has liability for in Florida Statutes				
	9. Name and Address of Currer		_1 <u>-11</u>		10. Name and Address of New R		gent		1
				31 Name			Z		
	obert s LM Beach Lakes BLVD		1	32 Street Add	Street Address (P.O. Box Number is Not Acceptable)				1
	ALM BEACH FL 33401		1	33					
			1	34 City		FL	85 Zip	Code	1
or registere	o the provisions of Sections 607.0503 ed agent, or both, in the State of Fiori h, and accept the obligations of, Sect	da. Such change was authoriz	ed by the co	e named corpo orporation's boa	ration submits this statement for the pur rd of directors. I hereby accept the appo	pose of char pintment as i	iging its re egistered	egistered office agent. I am	1
SIGNATURE .	Styriat nei typich er prodoktina ski el regi derett ager.	raint Start and Large MI	TH Designant A	gent Signature respons	id what is spenished for	ĐA*E			
12.	OFFICERS AND DIRECTORS		13.	gr i sagranor i repino	ADDITIONS/CHANGES TO OFF	. 	DIRECTO	RS IN 12	⊣ 8
TILE	DP	DELETE	1 1 1 1	L F] Change	Addition	12
NAM:	Tanen, Harry		1.2 NAM	1E					24
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CHT SLZP	WEST PALM BEACH FL			r - \$1 - ZiP					CR2E034 (12/95)
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 cath, 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 AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

124/96 (407) 798-3190