FILED Apr 13, 1999 8:00 am Secretary of State

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PROFIT **SORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **F46751**

1. Corporation Name

TAHITIAN EXCAVATING, INC.

Principal Place of Business Mailing Address						
2535 SUCCESS	DR	2535 SUCCESS DR				
ODESSA FL 33556 ODESSA FL 33556						0.0 Mar MD 7 M F 110 00 40 F
US US						DO NOT WRITE IN THIS SPACE
	•					3. Date incorporated or Qualifed 09/30/1981
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59-2132432 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required	
City & State	0	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip Country		Zip Country				8. This corporation owes the current year Intangible
24	25	29 3	30 <u> </u>			Personal Property Tax. Yes No
	9. Name and Address of Current	Registered Agent		1		10. Name and Address of New Registered Agent
BAKER,RICHARD W.				31	Name	
			1	32	Street Addre	ess (P.O. Box Number is Not Acceptable)
	S SUCCESS DR				<u> </u>	
UDE	SSA FL 33556		- 1	B3		
			1	34	City	FL 85 Zip Code
				e above-named corporation submits this statement for the purpose of changing its registered		
office or re agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida. Such change was aut	thorized I	by th	e corporation	n's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	Registered A	aent s	ignature required v	when reinstating) DATE
12.	OFFICERS AND		13.	<u> </u>	0/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	DELETE	1.1 TITL	E	1/1	· _ Change
NAME	SPEER, RICHARD M.		1.2 NAM	ΙE		ICHAED M. SPEEL
STREET ADDRESS	2535 SUCCESS DR		1.3 STR	FFT A	DDRESS 2	535 Success Write
i i	ODESSA FL 33556		1.4 CITY		7IP 07	DESSA FL 33556
CITY-ST-ZIP	00200772 00000	DELETE	2.1 1111		E.A.	— / → I Change] Additio
			2.2 NAM		76	CHARD W. BAKER
NAME					DORESS 2.5	535 SUCCESS DRIVE
STREET ADDRESS					-	DESSA FC 33556
CITY-ST-ZIP		☐ DELETE	2.4 CIT		ZIP 121	DE23A 1
TITLE			3.2 NAM			
NAME	•				200000	
STREET AODRESS					DDRESS 7/10	
CITY-ST-ZIP		[] DELETE	3.4. CIT		4117	☐ Change ☐ Addition
TITLE		FT NETELS	4.1 TITL			
NAME			4. 2 NA			
STREET ADDRESS					DDRESS	
CITY-ST-ZIP	<u></u>	[7] DELETE	4.4 CITY		ZIP [☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITL			. Cionange Dixuduk
NAME			5.2 NAW			
STREET ADDRESS			1		DDRESS	
CITY-ST-ZIP		——————————————————————————————————————	5.4 CITY		ZIP	
TITLE		☐ DELETE	6.1 TITL			☐ Change ☐ Addition
NAME			6.2 NAM			
STREET ADDRESS			6.3 STR	EETA	DDRESS	

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS