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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F52866

(3)

ALUMINUM BUILDING CONTRACTORS, INC.

Principal Place of Business 9101 ELLIS ROAD MELBOURNE FL 32904

Mailing Address

9101 ELLIS ROAD MELBOURNE FL 32904

FILED Jan 23 1998 8:00am Secretary of State



								DO NOT WRITE IN THIS SPACE					
								3. Date Incorporated or Qualified					
								11/06/1981					
	lace of Business	2a. Mailing Address						4. FEI Number			Applie		
21		26						59-2155147				pplicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						5. Certificate of Status Desired	7 5	,		litional	
22	· · · · · · · · · · · · · · · · · · ·	27							<u> </u>	Fee	Requi	ired	
City & State	9	City & State						6. Election Campaign Financing	_	\$5.0)0 Ma	у Ве	
23		28						Trust Fund Contribution		Adde	ed to F	ees	
^{Zip}	Country	Zip Cou				This corporation owes or has paid the current year Intangible					gible		
24	25 29 30					Personal Property Tax due June 30. Yes No					lo .		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent													
HUGHES, DONALD					81 Name								
	00 TURTLEMOUND ROAD					82 Street Address (P.O. Box Number is Not Acceptable)							
	ELBOURNE FL 32934					Career Address (1.0. Dox Number is not Addeptable)							
••••					83	83							
					84	City			FL	55 Zi	ip Coo	te	
44 Durament I	to the excelsions of Captions 607 0500	and 607 1500	Clasida Statu	ion the			d 00r00	sation as basis tiple statement for the same			- 160	olotorod	
11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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.													
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.													
SIGNATURE													
	Signature, typed or printed name of registered agent		le, (NO			ent signatur	re required	<u> </u>	DATE				
12.	OFFICERS AND	DIRECTORS		13				ADDITIONS/CHANGES TO OFFICERS	S AND DI			_	
TITLE	PTD		DELETE	1.1	TITLE				L_	Chang	e _	Addition	
NAME	HUGHES, DONALD			1,2	MAME								
STREET ADORESS	2200 TURTLEMOUND ROAD			STREET	ADDRESS								
CITY - ST - ZIP	MELBOURNE FL			1,41	OITY-S	T-ZIP							
TITLE	S		DELETE		ITLE					Change	e L	Addition	
NAME	HUGHES, BARBARA			22	VAME					-			
STREET ADDRESS	2200 TURTLEMOUND ROAD				2.3 STREET ADDRESS		}						
	MELBOURNE FL				2.4 CITY-ST-ZIP		İ					ļ	
CITY-ST-ZIP	MELBOORINE FL		DELETE		CITY-S TITLE	ST-ZIP		er		Change	<u>, </u>	Addition	
TITLE	PRICTICE DONALD 1		□ otterit						ب	Onang	Г	1 Vanition	
NAME	HUGHES, DONALD J				VAME								
STREET ADDRESS	1358 ELDRON BLVD SW			3,3	STREET	REET ADDRESS							
CITY - ST - ZIP	PALM BAY FL			3.4.	CITY - S	ST-ZIP						···	
TITLE			DELETE	4.1	ITLE					Change	e L	_ Addition	
NAME				4. 2	NAME		1						
STREET ADDRESS				4.3	STREET	ADDRESS	1						
CITY-ST-ZIP				4.4	CITY-S	T-ZIP	1						
TITLE			DELETE	5.1	ITLE		T			Change	e [Addition	
NAME				521	IAME		-						
STREET ADDRESS						ADDRESS	1						
CITY - ST - ZIP			DELETE		TTLE	1-417	+			Change	e	Addition	
TITLE			en Merrir						ш	Smarry	· <u>-</u>		
NAME					AME								
STREET ADDRESS				6.3	TREET	ADDRESS							
CITY-ST-ZIP				6.4 (CITY-S	T-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 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 is 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 appear											ormation		
officer or o	director of the cornoration or the recely	er or trustee e	mpowered to	execute	this s	report a	s requir	red by Chapter 607. Florida Statutes: and	that my i	iame :	appea	rsin	

Block 12 or Block 13 if changed, or on an attachment with an address