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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F9300000504 1. Corporation Name

BUILDING CONSTRUCTION ENTERPRISES, INC.

Principal Place	of Business	Mailing Address						,	
3115 ROANOKE	ROAD	3115 ROANOKE ROAD							
KANSAS CITY A	IO 64111	KANSAS CITY MO 64111				DO NOT WRITE IN THIS SPACE			
US		US				3. Date Incorporated or Qualifed			
						01/22/1993			
		Da 44-181				4. FEI Number		1 1 40	plied For
─ ¬ ′	ace of Business	2a. Mailing Address	⊢ ,			36-3493663		_ 	Applicable
21		Suite, Apt. #, etc.						\$8.75 A	
Suite, Apt.	#, etc.	├ ─ ' ' ' '				5. Certifcate of Status Desired		Fee Re	I .
22		27 City & State						\$5.00	
City & State	3	 				6. Election Campaign Financing Trust Fund Contribution		Added to	·
23	Country	Zip Country				8. This corporation owes the curre	ont year Inta		4
Zip			¬ '			Personal Property Tax.	-	∏Yes	II No
24 25 29 29 9. Name and Address of Current Registered Agent			30			10. Name and Address of New R			
	9. Name and Address of Current	Registered Agent	8	11	Name	70. Haile alla Flactor S. Hotel		9	
CROWDER, J. M. DUFFY			Ľ						
	BANK BLDG., STE. 1006	82 S			Street Addre	ss (P.O. Box Number is Not Accepta	ble)		
	E. MADISON ST.	83							
	PA FL 33602		l°	13					
I CMI	-MIL 33002.		8	14	City		FL	85 Zip C	Code
			411	Ц		and an authorite this statement for the		hanging its	registered
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	of Florida. Such change was auth	nonzea c)γ tn	named corpo se corporation	ration submits this statement for the has board of directors. I hereby accep	t the appoin	ment as re	gistered
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Florida	a Statute	es.	•				Ì
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg				gent s	signature required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIRECTO	RS IN 12
12.	01110211011110		13. 1.1 ππε		1/	ADDITIONS/CHANGES TO OTT	IOLINO AND	Change	Addition
TITLE	CDP	- - · · · ·			114	Omail PAILLA		□ onange	2
NAME	SCHOONOVER, L D		1.2 NAM		17/1	RMON, PAULA 15 ROAWOKE RDAD			
STREET ADDRESS	3115 ROANOKE ROAD		1.3 STREET ADDF		DDRESS 711	S RUADURE RE	, ,,,,,,		
CITY-ST-ZIP			1.4 CITY	_	ZIP K	ANSAS CITY, MO	<u>0411/</u>	Change	Addition
TITLE			2.1 TITLE	E				Change	☐ Addition
NAME			2.2 NAM	E					-
STREET ADDRESS			2.3 STR	EETA	DORESS				
CITY-ST-ZIP			2.4 CITY	Y-\$T-	ZIP				
TITLE	V DELETE 3.1		3.1 TITLE	E		•		Change	Addition
NAME	MORRIS, NORMAN 32		3.2 NAM	E	1				
STREET ADDRESS			3.3 STRI	EET A	DDRESS				ł
CITY-ST-ZIP	KANSAS CITY MO		3.4. CITY	Y- \$T-	ZIP				
TITLE	V	☐ DELETE	4.1 TTL	E				Change	☐ Addition
NAME	SCHOONOVER, KENDALL		4. 2 NAM	Æ					. }
STREET ADDRESS	3115 ROANOKE ROAD		4.3 STR	EÉTA	DDRESS]
CITY-ST-ZIP	KANSAS CITY MO		4.4 CITY	-ST-2	ZIP				•
TITLE		☐ DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAM	E					1
STREET ADDRESS			5.3 STR	EETA	DDRESS				ĺ
			5.4 CITY	'-ST-	ZIP				
CITY-ST-ZIP		☐ DELETE	6.1 TITL					Change	Addition
NAMÉ		<u> </u>	6.2 NAM	E				_	[
	pr 40 300 30				DORESS				
STREET ADDRESS	potti vala i labora teknologija		# J.J J.10						

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:

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90225 048 ***150.00