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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500000425 (7)

PCE CONSTRUCTORS, INC.

Principal Place of Business Mailing Address
6225 CHOCTAW DR P O BOX 46417

FILED
May 28 1998 8:00am
Secretary of State



6225 CHOCTAW DR BATON ROUGE LA 70805 US		P O BOX 46417 Baton Rouge La 706 US	BATON ROUGE LA 70895-6417		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified	
					01/18/1995	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 same as above		26 same as	same as above		72-1082832	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State)	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	1		Trust Fund Contribution	Added to Fees
Zıp	Country	Zφ			8. This corporation owes or has paid the	
24		29	[30]		Personal Properly Tax due June 30. X Yes INo 10. Name and Address of New Registered Agent	
	9. Name and Address of Curre	ent Hegistered Agent		Name	10. Name and Address of New Register	an when
C T CORPORATION SYSTEM				INGITIO		
	IO S. PINE ISLAND RD. INTATION FL 33324		82		dress (P.O. Box Number is Not Acceptable)	
			83	'		
			84		•	L 85 Zip Code
11. Pursuant t office or re agent. Lar	o the provisions of Sections 607.05 egistered agent, or both, in the Stat or fa miliar with, and accept the obti	02 and 607.1508, Florida Stat le of Horida Such change wa gations of, Section 607.0505,	lutes, the above s authorized b Florida Statuto	ve-named co by the corporates.	rporation submits this statement for the purpos ation's board of directors. I hereby accept the	e of changing its registered appointment as registered
SIGNATURE				 		
	Signature, typed or pented name of rugisle ed at	gent and title if applicable (N NO DIRECTORS	13.	ent signature red	uired when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS A	·
12.	PD	DELETE	1.1 TILE	T	ADDITIONS/CHANGES TO OF TOLERS	Change Addition
NAME	ROBARDS, BOB N		1.2 NAMŁ			
STREET ADDRESS	10537 RONDO AVE.			T ADDRESS		
CITY-ST-ZIP	BATON ROUGE LA 70815		1.4 CITY-			
TITLE	VD	DELETE	2.1 TITLE	-		Change Addition
NAME	ROBARDS, MARK N		22 NAME			
STREET ADDRESS	47 N SHERWOOD GLEN		2.3 \$1800	T ADDRESS		
CITY-ST-ZIP	MONUMENT CO		2 4 CITY-	·ST·ZIP		
TITLE	STD	DELETE	3.1 TITLE			Change Addition
NAME	JONES, CAROL L		3.2 NAME			
STREET ADDRESS	13132 SUGAR BOWL AVE.		3 3 STREE	1 ADDRESS		
CITY+ST-ZIP	BATON ROUGE LA		3.4. CITY-	-S1-ZIP		
TITLE		DELETE	4.1 TITCE			Change Addition
NAME			4. 2 NAMI			
STREET ADDRESS			4.3 STREE	1 ADDRESS		
CITY+ST-ZIP			4.4 CHY-	ST-ZIP		
TITLE		L DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	1 ADDRESS		
CITY+ST-ZIP			5.4 CITY -	S1-ZIP		About 1 Address
TITLE		☐ DELETE	6.1 TO LE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	1 ADDRESS		
CITY-ST-ZIP			6.4 CITY-	\$1-ZIP	Control of ORIOVA Florida Octobra Libration	r partifu that the information

14. Thereby certify that the information supplied with this filling 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 suppliemental 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 coreoporation or the receiver or trostee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or gruan attachment with an address.

-1712 1788