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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business

SIGNATURE?



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 05 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000001567 (5)

KUPERUS CONSTRUCTION LTD., INC.

| C/O T.C. ROBERGE & CO. 1 BEACH DR. #220 ST. PETERSBURG FL 33701 | | C/O T.C. ROBERGE & CO. 1 BEACH DR. #220 ST. PETERSBURG FL 33701-3952 | | | | | |
|---|--|--|---|----------------------------------|--|---|---|
| | | | | | 3. Date incorporated or Qualified 03/31/1995 | 3a. Date of Last 04/14/1996 | |
| · | ace of Business | 2a. Mailing Address | | | 4. FEI Number | | Applied For |
| 21 | | 26 | | | 98-0159159 | | Not Applicable |
| Suite, Apt. #, etc. | | Soite, Apt. #, etc. | | 5. Certificate of Status Desired | | Additional Regulred | |
| City & State | | City & Stale | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | & Floation Compaign Financing | | ···· |
| 23 | | 28 | | | Election Campaign Financing Trust Fund Contribution | | O May Be d to Fees |
| Zip | Country | Zip | Country | | B. This corporation has liability for i | | |
| 24 | 25 | 29 | 30 | | · · · · · · · · · · · · · · · · · · · | Yes No | |
| | 9. Name and Address of Curren | t Registered Agent | | | 10. Name and Address of New Re | pistered Agent | |
| ROB | ERGE, THOMAS C CPA | | 81 1 | Name | | | |
| ONE | BEACH DRIVE SE - STE 220 | | 82 5 | Street Addre | ess (P.O. Box Number is Not Acceptab | le) | *************************************** |
| ST. I | PETERSBURG FL 33701 | | L | | | | |
| | | | 83 | | | | |
| | | | 84 (| City | Miles de la companya del companya de la companya del companya de la companya de l | 85 Z | p Code |
| | | | 1 1 | • | • | FL [] | • |
| office or c | to the provisions of Sections 607,050, egistered agent, or both, in the State m lamiliar with, and accept the obliga | of Florida. Such change was au | ithorized by th | ie corporati | oration submits this statement for the p ion's board of directors. I hereby accep | of the appointment a | as registered |
| | Signatine, hyped or porters used a finished age | | | signature require | ed when reinstating) | DATE | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFIC | CERS AND DIRECTO | |
| 111.6 | PVST Kuperus, andy | DELETE | 1.1 TITLE | | | L. Change | : [] AUURIUR |
| tiAMF | C/O T. C. ROBERGE/1 BEACH | ND #220 | 1.2 NAME | | | | |
| STREET ADDRESS | ST. PETERSBURG FL 33701 | Un. #220 | 1.3 STREET AD | | | | |
| CHY-SE-ZIP | CVCD | DELETE | 1.4 CITY-\$T-7 2.1 TITLE | ZIP | | Change | e Addition |
| TIREF | KUPERUS, ANDY | C DECETE | 2.1 MAME | | | | Lad resident |
| NAME STREET ADDRESS | C/O T. C. ROBERGE/1 BEACH | DR. #220 | 2.3 STREET AD | DOCCC | | | |
| | ST. PETERSBURG FL 33701 | DIN RUNO | 2.4 CITY-ST | | | | |
| 7(1) E | | DELETE | 3.1 TITLE | £H . | P-3-17-6 1 - 3-17-7-18-18-18-18-18-18-18-18-18-18-18-18-18- | ☐ Change | e Addition |
| NAME | | | 3.2 NAME | ľ | | | |
| STREET ADDRESS | | | 3.3 STREET AD | INRESS | | | |
| 0/17 - \$* - 7/P | | | 3.4. CITY-ST- | | | | |
| TRILE | | ☐ DELETE | 4.1 TITLE | | , | ☐ Chang | e Addition |
| NAME | | | 4. 2 NAME | | | | |
| STEELT ADDRESS | | | 4.3 STREET AD | DDRESS | | | |
| CH Y ST - ZIP | | | 4.4 CITY - ST - 2 | | | | |
| THE | and the second s | DELETE | 5.1 TITLE | | 4 100 100 100 100 100 100 100 100 100 10 | ☐ Chang | e Addition |
| NAME | | | 5 2 NAME | | | | |
| \$TREET ADORESS | | | 5 3 STREET AD | DRESS | | | |
| CHY-ST-ZIF | | | 5.4 DITY - \$1 - 1 | ZIP | | | |
| 1:1LE | | DELETE | 61 TITLE | | | ☐ Chang | je 🔲 Addition |
| NAME | | | 6.2 NAME | | | | |
| STREET ADDRESS | | | 63 STREET AD | DORESS | | | |
| CI*Y-SI-ZIP | | | 64 CITY-ST- | | | | |
| 14. I do here | by certify that the information supplie | d with this filing does not qualify | for the exem | ption stated | d in Section 119.07(3)(i), Florida Statute | s. I further certify that effect as if made | ial the |
| t am an c appears | in indicated on this arritual report or sofficer or director of the corporation of In Block 12 or Block 13 if changed, o | the receiver or trostee empower on an altachniont with an add | ered to execut ress. | e this repor | my signature shall have the same legant as required by Chapter 607, Florida 5 | itatutes; and that m | y name |