## 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

F97000003610 (9) DOCUMENT #

INNOVATIVE UTILITY CONSTRUCTION & EGINEERING, IN

## **FILED** Jun 04 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address								- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
8331 HOYLE /	AV <b>EN</b> UE		1	8331 HOYLE AVENUE				
DALLAS TX 75227 DALLAS TX 75227								DO NOT WRITE IN THIS SPACE
								3. Date Incorporated or Qualified 07/11/1997
2 Principal Pl	. Mailing Address				· · · · · · · · · · · · · · · · · · ·			
2. Principal Place of Business				26				4. FEI Number Applied For Not Applied For Not Applied For
Suite, Apt. #, etc.				Suite, Apt #, etc.				\$9.75 Additional
22				27				5. Certificate of Status Desired Fee Required
City & State				City & State				6. Election Campaign Financing \$5.00 May Be
Zin Couply				28				Trust Fund Contribution Added to Fees
Zip	Zip Country			Zip Cour			,	8. This corporation owes or has paid the current/year Intangible
24	25			29 30				Personal Property Tax due June 30.
9. Name and Address of Current							,	10. Name and Address of New Registered Agent
		ATION SYSTEM	_			81 Name		
1200 <b>So</b> uth Pine Island Road Plantation FL 33324						82	Street Addre	ess (P.O. Box Number is Not Acceptable)
,,,,						63		, <del>1</del>
						84	City	85 Zip Code
44 Durawaat	to the second	con al Castiona CO7	0000 and i	COT (COO Florido Chat	. top the o			FL 1881 ZIP 00000
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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.								
SIGNATURE Signature, typicd or pented name of registered agent and their happlicable (NOTE Registered Agent signature required when reinstating)  DATE								
Signature, typed or ponted name of registered agen  12. OFFICERS AND				· · · · · · · · · · · · · · · · · · ·			an signature require	ed when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	271777170		DELETE	1.1 II	TLF		☐ Change ☐ Addition
NAME	IRWIN, L	LORIE W			1.2 N	AME		
STREET ADDRESS	s <b>83</b> 31 HOYLE AVENUE			1.3 ST		REET	ADDRESS	
CITY-ST-ZIP	DALLAS	TX			1.4 CI	TY-S	iT - ZIP	
TITLE	81			DELETE	2.1 71			☐ Change ☐ Addition
NAME	IRWIN, GORDON R 8331 HOYLE AVENUE			2.				
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CITY-ST-ZIP	DALLAS TX			2.4(		ITY-S	ST - ZIP	
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NAME					3.2 N	AME		
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NAME					4. 2 N			
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NAME					5.2 N			
STREET ADDRESS							ADDRESS	
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NAME					6.2 N		1000000	
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP	artifu that th		al mist, state	()	6.4 CI	IY-S	T-ZIP	Costion 110 07/2Vi) Florida Statutos Lituribas partitu that the information

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 informatio 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 eath; that I am an officer or director of the corporation of the receiver or trustife empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in