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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

F9700006373 (1)

GENERAL CONTRACTING (USA) CO. LIMITED

FILED Apr 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 6827 N. ORANGE BLOSSOM TRAIL. #2 6827 N. ORANGE BLOSSOM TRAIL. #2 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/03/1997 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For SSAO GLADES 5520 Crapes C 59-3476586 Not Applicable Suite, Apt. #, etc Suite Ant # etc. \$8.75 Additional V 5. Certificate of Status Desired 22 Fee Required 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Countr 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DEMPSEY, W G ESQ 505 S.FLAGLER DR., #1330 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33401 63 City 85 Zip Code 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE \_\_ DELETE 1.1 TITLE Change Addition NAME 1.2 NAME UPRIGHT, CLIFFORD I STREET ADDRESS NEW HOUSE ATCH LENCH NEAR EVESHAM 1.3 STREET ADDRESS WORCESTERSHIRE UNITED KINGDO CITY - ST - ZIP 1.4 CITY - ST- ZIP THLE ... DELETE 2.1 TITLE Addition NAME ROBINSON, JAMES 22 NAME STREET ADDRESS 5520 GLADES CUTOFF RD. 23 STREET ADDRESS CITY-ST-ZIP FT PIERCE FL 34981 2 4 City-St-7iP DELETE TITLE 3.1 TITLE Addition NAME SMITH, PATRICIA L 3.2 NAME STREET ADDRESS STATION RD WARWICK HOUSE 3.3 STREET ADDRESS CITY-ST-ZIP <u>Kenilworth Warwickshire UK</u> 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME UPRIGHT, CLIFFORD 4. 2 NAME STREET ADORESS STATION RD WARWICK HOUSE 4.3 STREET ADDRESS CITY-ST-ZIP <u>Kenilworth Warwickshire UK</u> 4.4 CITY-ST-ZIP TETLE DELETE 5.1 TITLE Change Addition NAME HENDERSON, JAMES 5.2 NAME STREET ADDRESS 6827 N. ORANGE BLOSSOM TRAIL, #2 **53 STREET ADDRESS** CITY-ST-ZIP ORLANDO FL 32860 5.4 CITY-ST-ZIP DELETE THILE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 impowered 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 a address.

SIGNATURE:

w/slag

HATESHIE GASC