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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(2)

1997 DOCUMENT # G73703 BLUE JAY CONSTRUCTION, INC.

FILED Jan 14 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 14233 S.W. 119 AVENUE 14233 S.W. 119 AVENUE				<u></u>				
MIAMI FL 33		MIAMI FL 33186-6009	-					
					3. Date incorporated or Qualified 12/08/1983	3a. Date of La 06/04/199		
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For	
Suite, Ap	it # oto	Suite, Apt #, etc.			59-2355683	. 60	Not Applicable	
22	α. π, εισ	27			5. Certificate of Status Desired		5 Additional Required	
City & St	ale	City & State		····	6. Election Campaign Financing	\$5.	00 May Be	
23		28			Trust Fund Contribution		led to Fees	
Zip	Country	Zip	Countr	у	8. This corporation has liability for it Florida Statutes	ntangible tax und Yes ☐ No	er s. 199.032,	
24	25 9. Name and Address of Curre	29 nt Registered Agent	30		10. Name and Address of New Re	<u> </u>		
VI	LLA, KENNETH		81	Name			······································	
	233 S.W. 119 AVENUE				iress (P.O. Box Number is Not Acceptab	le)		
M	AMI FL 33186				***************************************		****	
			83					
			84	City		FL 85	Zip Code	
11. Pursuar	nt to the provisions of Sections 607.050	02 and 607.1508, Florida Stati	utes, the abov	re-named cor	poration submits this statement for the p	urpose of changi	ng its registered	
office or	r registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was	s authorized b	y the corpora	tion's board of directors. I hereby accep	ot the appointmen	t as registered	
SIGNATURE		,,						
	Signature, type tior printed name of registrated ag			ent signature requ	ired when reinstating)	DATE		
12.	OFFICERS AN	ID DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC		
NAME	CAULEY, MICHAEL	Active	12 NAME			LL OIG	igenanionii	
STREET ADDRESS	AAAA O WI TIRT AUG 100			T ADDRESS				
CITY - ST - ZIP	MIAMI FL		1.4 CITY -	ST-ZIP				
TITLE	\$	DELETE 2.1 T			President Change		nge 🔲 Addition	
NAME	VILLA, KENNETH 4444 S W 71ST AVE 102		2.2 NAME					
STREET ADDRESS	MIAMI FL		1	f ADDRESS				
CITY-ST-ZIP TITLE	IND WILL I	☐ DELETE	2. 4 CITY- 3.1 TITLE	SI-ZIP		Char	nge Addition	
NAME			3.2 NAME					
STREET ADDRESS	s		3.3 STREE	T ADDRESS				
C/TY-ST-ZIP		——————————————————————————————————————	3.4. CITY-	ST-ZIP	······································			
TITLE		DELETE	41 TITLE			∟ Char	nge	
NAMÉ OZOSCE A DODOGO			4 2 NAMI	l				
STREET ADDRESS CITY - ST - ZIP	9		4.3 STREE	T ADDRESS				
TITLE		DELETE	5.1 TITLE	OT LII		☐ Char	nge Addition	
NAME			5.2 NAME					
STREET ADDRESS	s		5.3 STREE	1 ADDRESS				
CITY ST-ZIF		F-1-2-2-	5.4 CITY-	ST-ZIP	The state of the s	- T-1 A.		
TITLE		DELETE	6 1 TITLE			Chai	nge 🔲 Addition	
NAME expect appears			6.2 NAME	1				
STREET ADORESS	>	•	6.4 CITY .	T ADDRESS				

14. To hereby certify that the information supplied with this filing does not quality 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 corporation or the preciser or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 15 if changed are on in attachment with an address.

SIGNATURE:

Kenneth Ville, President