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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

BLUE JAY CONSTRUCTION, INC.

Mailing Address

FILED

Jan 26 1998 8:00am

Secretary of State

14233 S.W. 119 AVENUE MIAMI FL 33186		14233 S.W. 119 AVENUE MIAMI FL 33186	14233 S.W. 119 AVENUE MIAMI FL 33186		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
A BU-1-10					12/08/1983	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21					59-2355683	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	├ ¬		5. Certificate of Status Desired	\$8.75 Additional
22 City & State		27				Fee Required
23		City & State	26		6. Election Campaign Financing	\$5.00 May Be
Zip	Country Zip		Country		Trust Fund Contribution	Added to Fees
24	25	29	30		This corporation owes or has paid the c Personal Property Tax due June 30.	urrent year Intangible
9. Name and Address of Current Registered Agent			1001		10. Name and Address of New Registered	
AIT	.A, KENNETH		81	Name		
14233 S.W. 119 AVENUE			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
	MI FL 33186			Liberra	areas (F.O. Box (variable) is (vol. Acceptable)	
			83			
		•	84	City	Fi	85 Zip Code
office of re	egi ster ed agent, or b oth, in the S	.0502 and 607.1508, Florida Statut tate of Florida. Such change was bligations of, Section 607.05 05 , Fl	authorized b	z the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing its registered
SIGNATURE			orrod otatato			
OIGHATORE .	Signature, typed or printed name of registers		E: Registered Age	ent signature requ	uired when reinstating) DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	P	☐ DELETE	1.1 TITLE			Change Addition
NAME	VILLA, KENNETH		1.2 NAME			
STREET ADDRESS	4444 S W 71ST AVE 102		1.3 STREET			
CITY-ST-ZIP TITLE	MIAMI FL DELETE		1.4 CITY - ST - ZIP			
NAME		L. DELEIE	2.1 THTLE			☐ Change ☐ Addition
STREET ADDRESS			2.2 NAME			
1			2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	DELETE		2. 4 CITY - ST - ZIP 3.1 TITLE		. 18	Change Addition
NAME			3.2 NAME			Change Modition
STREET ADDRESS			3.3 STREET	AMMORCC		
CITY-ST-ZIP			3.4. CITY-5	- }		
TITLE		DELETE	4.1 TITLE	// 24		Change Addition
NAME		_	4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - S			
TITLE		DELETE	5.1 TITLE	-		Change Addition
NAME			5.2 NAME	ļ		
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	address		
CITY-ST-ZIP			6.4 CITY-S	r - 7IP		

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 empowered 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 an address.