## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE CORPORATION ANNUAL REPORT Sandra B. Mortham

DOCUMENT #

P.O.D. CONSTRUCTION, INC.

Jan 29 1998 8:00am Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS G78318 (4)

**FILED** 

Principal Place of Business Mailing Address						i idaiais dait idaiat istaa stini tiaki lait sisti diati diati diati diati alaii laat
	DALSGAARD	C/O POUL DALSGAARE	)			
8855 NW 18			8855 NW 18 STREET			BO NOT WOLTE IN THIS ORANGE
CORAL SPE	RINGS FL 33071	CORAL SPRINGS FL 33071				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
2. Principal P	face of Business	2a. Mailing Address				01/12/1984 4. FEI Number Applied For
21		26				4. FEI Number Applied For S9-2353926 Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				60 7F
22		27				5. Certificate of Status Desired Fee Required
City & Stat	e	City & State				
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip				ntry		8. This corporation owes or has paid the current year Intangible
24	25	29	30	•		Personal Property Tax due June 30. Yes No
	9. Name and Address of Current					10. Name and Address of New Registered Agent
D	ALSGAARD, POUL			81	Name	e
	855 NW 18 STREET			82	Cton at	4.4.1/ (0.0.0)
	ORAL SPRINGS FL 33071		Į	-	Street	et Address (P.O. Box Number is Not Acceptable)
				83		
				84	City	FL 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.						
agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligat	or Florida. Such change was a ions of, Section 607.0505, Flo	utnorizeo rida Stati	ı by Jites	the corp	progration's board of directors. I hereby accept the appointment as registered
SIGNATURE						
				Ager	it signature	ure required when reinstating) DATE
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	•	DELETE	1.1 717		ı	Change Addition
NAME	DALSGAARD, POUL		1.2 NA			
STREET ADDRESS	8855 NW 18 STREET				ADDRESS	5
CITY-ST-ZIP	CORAL SPRINGS FL	Clasiere	1.4 CITY-S		- ZIP	
THTLE	V DALOGLADD VEN	<u></u> DELETE	2.1 111			☐ Change ☐ Addition
NAME	Dals <b>g</b> aard, ken		2.2 NA		}	KEN DALSGAARD
STREET ADDRESS	1650 ARABIAN DRIVE				ADDRESS	
CITY-ST-ZIP	LOXAHATCHEE FL		2. 4 CI		Γ-ZiP	
TITLE	L_I DELETE 3.1		1	3.1 TATLE		Li Change Addition
NAME			3.2 NAME			
STREET ADDRESS					ADDRESS	;
CITY-ST-ZIP			3.4. Cl		ſ-ZIP	<u></u>
TITLE			4.1 TIT	4,1 TITLE		Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 ST		ADDRESS	
CITY-ST-ZIP			4.4 CIT	Y-ST	-ZIP	
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NA	Æ	1	
STREET ADDRESS			5.3 STREET ADDRESS		ODRESS	
CITY - ST - ZIP			5.4 CIT	/-ST	- ZiP	
TITLE		DELETE	6.1 TIT!	E.		Change Addition
NAME			6.2 NAM	/E		
STREET ADDRESS			6.3 STR	EET A	ADDRESS	
CITY-ST-ZIP		6.4 CIT	/-ST-	- ZIP		
9.8 1 basales -						

I nereoy ceruly 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 peport 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 fustee 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.