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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **G79875**

1. Corporation Name
FELNER CONSTRUCTION INDUSTRIES, INC.

Principal Place of Business
 625 AUBURN CIRCLE WEST
 DELRAY BEACH FL 33444

Mailing Address
 625 AUBURN CIRCLE WEST
 DELRAY BEACH FL 33444

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/23/1984

2. Principal Place of Business
 21 **4182 Live Oak Blvd.**

2a. Mailing Address
 26 **4182 Live Oak Blvd.**

4. FEI Number
59-2639340 Applied For
 Not Applicable

Suite, Apt. #, etc.
 22

Suite, Apt. #, etc.
 27

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State
 23 **Delray Beach, Fl.**

City & State
 28 **Delray Beach, Fl.**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

Zip Country
 24 **33445** 25 **Palm Beach**

Zip Country
 29 **33445** 30 **Palm Beach**

8. This corporation owes the current year intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
FELNER, JAY
625 AUBURN CIRCLE WEST
DELRAY BEACH FL 33444

10. Name and Address of New Registered Agent
 81 Name **Jay Felner**
 82 Street Address (P.O. Box Number is Not Acceptable) **4182 Live Oak Blvd.**
 83
 84 City **Delray Beach** **FL** 85 Zip Code **33445**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		
TITLE	PD	<input type="checkbox"/> DELETE
NAME	FELNER, JAY	
STREET ADDRESS	625 AUBURN CIRCLE WEST	
CITY-ST-ZIP	DELRAY BEACH FL 33444	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	FELNER, SHIRLEY	
STREET ADDRESS	625 AUBURN CIRCLE WEST	
CITY-ST-ZIP	DELRAY BEACH FL 33444	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	4182 Live Oak Blvd.	
1.4 CITY-ST-ZIP	Delray Beach, Fl. 33445	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	4182 Live Oak Blvd.	
2.4 CITY-ST-ZIP	Delray Beach, Fl. 33445	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 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, with all other like empowered.

SIGNATURE: *Jay Felner* **RE REQUIRED** 3/26/99 561-963-8747
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0302024 11/03/91