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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 07 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # H09588

(5)

MICHAEL MLEKO GENERAL CONTRACTOR, INC.

Principal Place of Business C/O MICHAEL MLEKO 8006 PASO ROBLES BLVD. FORT PIERCE FL 34951		Mailing Address C/O MICHAEL MLEKO 8008 PASO ROBLES BLVD. FORT PIERCE FL 34951-1159			
				3. Date Incorporated or Qualified 06/26/1984	3a. Date of Last Report 01/24/1996
2. Principa: I	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2356891	Not Applicable
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	de la	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
23]	Country	[28] Zip	Country	Trust Fund Contribution 8. This corporation has liability for it	
24	25	29	30		Yes No
	9. Name and Address of Curre			10. Name and Address of New Reg	gistered Agent
MLI	eko, michael		81 Name		
	96 PASO ROBLES BLVD. RT PIERCE FL 34951		82 Street Add	ress (P.O. Box Number is Not Acceptab	le)
101			83		
			84 City		FL 85 Zip Code
office or	it to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the obliq	e of Florida. Such change was	s authorized by the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered it the appointment as registered
.	Signature, typed or per learning of registered as	<u> </u>	OTE: Registered Agent signature requi		DATE
12.	OFFICERS AN	ND DIRECTORS DELETE	13. 11 DILE	ADDITIONS/CHANGES TO OFFIC	Change Addition
T: EF	MLEKO, MICHAEL	· Fill better	1.2 NAME		
NAME STREET ADDRESS	ARAC DACO DODI EC DIVID		1.3 STREET ADDRESS		
CHY-ST-ZIP	FT. PIERCE FL		1.4 CITY-ST-ZIP		
TILE	V	DELETE	2.1 TITLE		Change Addition
M/ME	SHOLANDER, TAMMY	~	2.2 NAME		
STREET ADDRESS	8007 PASO ROBLES BLVD		2.3 STREET ADDRESS		
Crity - ST - ZIP	FT PIERCE FL		2. 4 CITY-ST-ZIP		
10.6	\$	DELETE	3.1 TITLE		Change Addition
NAV:	MLEKO, VICTORY	•	3.2 NAME		
STREET ADDRESS		,	3 3 STREET ADDRESS		
CHY-ST ZIF	FT PIERCE FL	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
TULE		ביין מניניונ	4. 2 NAME		The state of the s
NAME			4.3 STREET ADDRESS		
STHEET ALLOHOSS	·		4.4 CITY - ST - ZIP		
CHY-ST ZIP		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS	5		5.3 STREET ADDRESS		
CHY-SI &C			5.4 CITY-SY-ZIP		
TILE		DELETE	61 TITLE		Change Addition
NAME			62 NAME		
STREET ADDREST			6.3 STREET ADDRESS		
CHY+S1+70P	I ,		6.4 CITY - ST - ZIP	11.0.0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	I finding part it is at a
14. Ldo her	reby certify that the information suppli- tion indicated on this annual report or colliner or director of the correct ation.	ed with this filing does not qui supplemental annual report if or the receiver or trustee emp	ality for the exemption state s true and accurate and that owered to execute this repo	rd in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega ort as required by Chapter 607, Florida S	s. I runner certify that the all effect as if made under oath; that Statutes; and that my name
appear	s in Block 12 or Eleck 17 if Changed,	or on an attachment with an a	address.	, , , .,	

MICHAREL MLEKO 3/1/97

F SIGNING OFFICER OF DIRECTOR

Dayling Prices