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

Mailing Address

UNIT 10

2900 NW COMMERCE PARK DRIVE

BOYNTON BCH. FL 33426 - . .

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H29905

. Corporation Name

Principal Place of Business
2900 NW COMMERCE PARK DRIVE

BOYNTON BCH. FL 33426

DALE CONSTRUCTION CORPORATION

2. Principal Pl	ncipal Place of Business 2a. Mailing Address		,		4, FEI Number Applied For	
<u> </u>		26			59-2466430 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		*	\$8.75 Additional	
· · · · · · · · · · · · · · · · · ·		27			5. Certificate of Status Desired Fee Required	
City & State City & State				6. Election Campaign Financing \$5.00 May Be		
28			•		Trust Fund Contribution Added to Fees	
Zip			Country		8. This corporation owes the current year Intangible	
តា ៊ី	25 29 30		¬ .		Personal Property Tax. ☐ Yes - ☐ No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
5. Haire and Address of Suffere registers Agon.				81 Name		
PERRY, MARK A., ESQ.						
PERRY & SCHONE, P.A.			82	82 Street Address (P.O. Box Number is Not Acceptable)		
50 S.E. FOURTH AVENUE			93	83		
DELRAY BEACH FL 33483			103	'		
			84	City	85 Zip Code	
					FL S S S S S S S S S S S S S S S S S S S	
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 AND A SIGNATURE AND						
	Signature, typed or printed name of registered agent			t signature re	dured when remounty	
12.			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE			1.1 TITLE	1	E Onling E reason	
NAME	Street, three tree		1.2 NAME	1	2900 N.W. Commerce Park Drive, Unit #10	
STREET ADDRESS	Trabilities 11-11-11-11-11-11-11-11-11-11-11-11-11-		1.3 STREET	ADDRESS		
CITY-ST-ZIP			1.4 CITY-S	T- ZIP	Boynton Beach, FL 33426	
TITLE	ST □ DELETE 2.1 TI		2.1 TITLE	1	☐ Addition	
NAME	DALE, TRUDY 222N		2.2 NAME			
STREET ADORESS	DRESS 10531 ST ANDREWS RD 2.3 S		2.3 STREET	ADDRESS	2900 N.W. Commerce Park Drive, Unit #10	
CITY-ST-ZIP	BOYNTON BEACH FL 2.40		2. 4 CITY-S	T-ZIP	Boynton Beach, FL 33426	
TITLE	1		3.1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME			
			3.3 STREET	ADDRÉSS	,	
STREET ADDRESS			3.4. CITY-S			
CITY-ST-ZIP		☐ DELETE	4.1 TITLE	,,-&IF	☐ Change ☐ Addition	
	-		4. 2 NAME		_ ,	
NAME	•	'i				
STREET ADDRESS			i	ADDRESS	·	
CITY-ST-ZIP	<u> </u>		4.4 CITY-S	T-ZIP	☐ Change ☐ Addition	
TITLE			5.1 TITLE		: Change [2] Modulon [1]	
NAME			5.2 NAME	l	· ·	
STREET ADDRESS	•		5.3 STREE			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS 6.3 ST			6.3 STREET	ADDRESS	·	
				t		

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 trystee 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:

TIMO TO TO THE SAME OF BIGURIES OF DIRECTOR

3/23/99

561-582-6600

Daytime Phone #

FILED Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90004 010 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

11/14/1984

CR2E034 (41/98)