SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # H40031

(7)

BIRD CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

3314 NORTHSIDE DR UNIT 84 P O BOX 4140 KEY WEST FL 33040 3314 NORTHSIDE DR UNIT 84 P O BOX 4140 KEY WEST EL 33040 FILED Jul 22 1997 8:00am Secretary of State



KEY WEST FL 33040		KEY WEST FL 33040		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 01/28/1985	3a. Date of Last Report 03/08/1996
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
	O BAGLE AVE		ILE AUE	59-2495899	Not Applicable
Suite, Apt. 4	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	WEST, FL	City & State 28 KEY WES	r, ք Լ	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
PO 0		Zio		This corporation owes or has pair	
Zip 330	40 25 MOURGE	29 T33040 3	Country	Personal Property Tax due June	
	9. Name and Address of Current		a communicación de la calenda de la composición del composición de la composición de	10. Name and Address of New Reg	istered Agent
BIRD, DEBORAH ANN (FRA FEMORE DEBORAH) 81 Name				BIRD DEBORAH ANN	
3314 NORTHSIDE DR UNIT 84			82 Street Addre	ess (P.O. Box <u>Number is Not Accept</u> ab	<u>e)</u>
KEY WEST FL 33040			83 56	26 EAGLE AV	E
			83		
.i 				4 WEST	FL 85 7ip Code 330Yo
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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and into it applicable (NOTE Hogistered Agent signature required when relinstating) DATE					
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PD	DELETE	1.1 TITLE		Change
NAME	BIRD, RICHARD		1.2 NAME		_
STREET ADDRESS	3314 NORTHSIDE DR, UNIT 84		1.3 STREET ADDRESS 3	626 EAGLE AUG	
CITY-ST-ZIP	KEY WEST FL VSTD	- April 1	1.4 CITY - ST - ZIP		
TITLE	BIRD, DEBORAH ANN	DELETE	2.1 TITLE		nange
NAME	3314 NORTHSIDE DR, UNIT 84		2.2 NAME		
STREET ADDRESS	KEY WEST FL		2.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		-
TITLE		DELETE	4.1 NILE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		·
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		·
STREET ADDRESS			5.3 STREET ADDRESS		
CHY-ST-ZIP		DELETE	5.4 CITY+ST-7IP 6.1 TITLE		Change Addition
TITLE NAME		DELLIE	6.2 NAME		
			6.2 NAME 6.3 STREET ADDRESS		
STREET ADDRESS			6.4 CITY-ST-ZIP		
CITY-ST-ZIP			0.4 UHY-SI-ZIP		

14. I do 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.

OLOATAS MENTE PITE TOTAL IN