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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H42079

(4)

FILED Apr 06 1998 8:00am Secretary of State

	ER CONTRACTING COMP	ANY, INC.	(T)					
Principal Plac	be of Business	Mailing Addr	ess				eimit Aiger Sikis atuli a	*****
	BREWER, JR.		BREWER. JR.					
1806 NEW JERSEY AVE. 1806 NEW JERSEY AVE. LYNN HAVEN FL 32444 LYNN HAVEN FL 32444						DO NOT WRITE IN THIS SPACE		
	TO THE VETTO	E11414 1411E				3. Date Incorporated or Qualified		
						02/11/1985		
2. Principal Place of Business 2a. Mailing Address			·		4. FEI Number	A	pplied For	
21		26				59-2487279		lot Applicable
		Suite, Apt	Suite, Apt. #, etc.					Additional
27						Fee Required		
City & State		City & State				6. Election Campaign Financing\$5.00 May Be		
23		28		Trust Fund Contribution				
Zip	Country Zip			Country		8. This corporation owes or has paid the current year Intangible		
24	25	[29]		30	· · · · · · · · · · · · · · · · · · ·	Personal Property Tax due June 30		☐ No
·	9, Name and Address of Curre	ent Hadistered Ağe	m.	81	Name	10. Name and Address of New Regis	reten Waeur	
	REWER, H. B., JR.			"	INALLIG			
	806 NEW JERSEY AVE.			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
LYNN HAVEN FL 32444				83				
				83				
				84	City		FL 85 Zip	Code
44 0	10.10.00	00 1 007 4500 5			L	rporation submits this statement for the purp ation's board of directors. I hereby accept the		N
12.	Signature, typed or printed name of registered at OFFICERS AI	ND DIRECTORS		13.	mi signature requ	ulted when reinstating) ADDITIONS/CHANGES TO OFFICER		RS IN 12
TITLE	P DELETE BREWER, H. B., JR.		1.1 TITLE 1.2 NAME			☐ Change	☐ Voaition	
NAME PERSET ARRESTO	1806 NEW JERSEY AVE.				4000000			
STREET ADDRESS	LYNN HAVEN FL			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP				
CITY-ST-ZNP TITLE	ST DELETE		2.1 TITLE			Change	Addition	
NAME		REWER, CARLENE P.		2.2 NAME				
STREET ADDRESS	1806 NEW JERSEY AVE.		2.3 STREET ADDRESS					
CITY-ST-ZIP	LYNN HAVEN FL			2.4 GITY - S				
TITLE			DELETE	3.1 TITLE	'" +		Change	Addition
NAME	}			3.2 NAME	1			
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP				3.4. CITY - 5	}			
TITLE			DELETE	4.1 TATLE			☐ Change	☐ Addition
NAME				4.2 NAME	.			
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY-S	T-ZIP			
TITLE			DELETE	51 TITLE			☐ Change	Addition
NAME				5.2 NAME	1			
STREET ADDRESS				D.C MAIL	- 1			
				5.3 STREET	ADDRESS			
CITY-ST-ZIP		_			1		<u>.</u>	
CITY-ST-ZIP TITLE			DELETE	5.3 STREET	1		☐ Change	☐ Addition
			DELETE	5.3 STREET 5.4 CITY-S	1		☐ Change	☐ Addition
TITLE			DELETE	5.3 STREET 5.4 CHY-S 6.1 TITLE	T-ZIP		☐ Change	☐ Addition

4. 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 eath; 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.

SIGNATURE:

HOWATURE AND TOPED OR PRINTED NAME O

H. B. Brewer,

3/14/98

850-265-5666