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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 11400

1. Corporation	CONSTRUCTION	422 13 N, INC.												
Principal Place	e of Business		Mailing Add	iress					111	BHON ON BIEN NE			I KARA MININ HANNA N	ISIN BIBIN 1881
Principal Place of Business 9360 NW 10 ST PLANTATION FL 33322 US			6250 N ANDREWS AVE SUITE 284 La 4 FT LAUDERDALE FL 33309-2176 US						corporated or Q		E IN THIS	SPACE		
									02/01/		•			
2. Principal Pl	ace of Business		2a. Mailing					A	4. FEI Nur				<u> </u>	plied For
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Suite, Apt.	#, etc.	_		pt. #, etc	ام				5. Certifca	te of Status Des	sired		\$8.75 A	
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City & State	9	<u> </u>	City & S		لما	lale 1	FI.			Campaign Fina and Contribution			\$5.00 Added t	
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24	9. Name and Addr				• 🛊   5	,0, <del>U</del>				nd Address of		egistered	Agent	
	or reason grown and		,			81	Name	е						
OKRI	ent, steven a					92	Chron	a A alduc	(D.O. Boy	Number is Not	Accontat	yle)		
9360	NW 10TH ST.					82	Stree	et Addres	SS (P.O. BOX	Number is Not.	Accebian	ole)		
	NTATION FL 33322					83								
PLAN														
PLAN						84	City				•		85 Zip (	Code
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11. Pursuant	to the provisions of Se egistered agent, or bot	h in the State ∩f Flo	orida Such	change v	was aut	s, the above	e-name	d corpo	ration submits	this statement	for the p	ourpose of	changing its	registered
11. Pursuant	to the provisions of Se egistered agent, or bot m familiar with, and ac	h in the State ∩f Flo	orida Such	change v	was aut	s, the above	e-name	d corpor poration	ration submits	this statement rectors. I hereb	y accept	the appo	changing its intment as re	registered
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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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-771-7253