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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H53683 (9)

CONTEMPORARY STRUCTURES, INC.

Mailing Address

Principal Place of Business % BURTON A. LAVENT

95 RURTON & LAVENT

FILED Jan 15 1998 8:00am Secretary of State



4956 S.W. 4TH ST. MARGATE FL 33068				4956 S.W. 4TH ST. MARGATE FL 33068					DO NOT WRITE IN THIS SPACE				
								3.	Date Incorporated or Qualified		_		
2.	Principal Place of Busi	ness	2a.	Mailing Address				4.	FEI Number	L	Applied For		
21			26						59-2560271		Not Applicable		
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.			,	5. Certificate of Status Desired					
23	City & State		28	City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
24	Zip	Country 25	29	Zip Country 30				8. This corporation owes or has paid the current year intaggible Personal Property Tax due June 30.					
9. Name and Address of Current Registered Agent 10. Name and								Name and Address of New Registered A	gent				
	LAVENT, BU				ĺ	81	Name						
4956 S.W. 4TH ST. MARGATE FL 33068						82	2 Street Address (P.O. Box Number is Not Acceptable)						
						83							
					ĺ	84	City		FL	85	Zip Code		
11.	office or registered ag	tions of Sections 607.0502 a pent, or both, in the State of th, and accept the obligation	Floric	ia. Such change was a	authorized	by	the corporation	ration n's bo	n submits this statement for the purpose of coard of directors. I hereby accept the appoint	hangi ntmer	ng its registered at as registered		
010	SMATHER												

office or agent. I a	registered agent, or both, in the State of Florida. Such ch am familiar with, and accept the obligations of, Section 60	ange was aut 07.0505, Florid	horized by the corp da Statutes.	poration's board of direc	tors. I hereby accept	the appointment as	registered
SIGNATURE							
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE, F		required when reinstating)		DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/C	HANGES TO OFFICE		
TITLE	_	DELETE	1.1 TITLE	[L Change	Addition
NAME	LAVENT, BURTON A.		1,2 NAME				
STREET ADDRESS	4956 S.W. 4TH ST.		1.3 STREET ADDRESS				_
CITY-ST-ZIP	MARGATE FL		1.4 CITY - ST - ZIP			/	
TITLE	PS	DELETE	2.1 TITLE	P5 _	_	Change	Addition
NAME	LAVENT, FRANCINE		2.2 NAME	LAVENT, 10405 C TAMPA,	ERANCE	O.E.	
STREET ADDRESS	2492 LINCOLN AVENUE		2.3 STREET ADDRESS	10405 6	out Isu	WD DR.	
CITY-ST-ZIP	COCONUT GROVE FL		2. 4 CITY - ST - ZIP	TAMPA.	FL 33	615	
TITLE		DELETE	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 TITLE			☐ Change	Addition
NAME			4, 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME	_		5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE			Change	Addition
TITLE	<u> </u>	بالكداد				LI Oldfige	AUUUU
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY - ST - ZIP				

I hereby certify that the information supplied with this filling 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.