

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H61183 (0)

1. Corporation Name

AHO CONSTRUCTION, INC.



Principal Place of Business

**1210 BREEZY WAY
SEBASTIAN FL 32958-8809**

Mailing Address

**1210 BREEZY WAY
SEBASTIAN FL 32958-8809**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

9. Name and Address of Current Registered Agent

**AHO, EDWARD I.
1210 BREEZY WAY
SEBASTIAN FL 32958**

3. Date Incorporated or Qualified

06/06/1985

3a. Date of Last Report

02/22/1995

4. FEI Number

59-2552019

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81

Name

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0500 and 607.1500, 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

Signature of corporation or other person authorized to sign this statement

Signature of Registered Agent or other person authorized to sign this statement

DATE

12. OFFICERS AND DIRECTORS

TITLE

**PD
AHO, EDWARD I.
1210 BREEZY WAY
SEBASTIAN FL**

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

**T
AHO, EVANGELINE B.
1210 BREEZY WAY
SEBASTIAN FL**

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 change is, or on an attachment with an address.

SIGNATURE:

Edward I. Aho

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/96

DATE OF FILING

CR2E034 (12/95)