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

CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1	MENT # H7172 ER CONCRETE CONSTRUC			1 1001011 3111 12801 HER NODE 11011 2111 6121 6121	I AIGH AMIT BARK RIBU KAN
Principal Plac	e of Business	Mailing Address			I BION BION BION FIUN III
16900 GATOR FT. MYERS F	₹ RD	16900 GATOR RD FT. MYERS FL 33912 US		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
2. Principal F	lace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	08/19/1985 4. FEI Number	Applied For
21		26		59-2570133	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country	Zip	Country	8. This corporation owes or has paid the cu	rrent year Intangible
24	25 9. Name and Address of Curre		30	Personal Property Tax due June 30. 10. Name and Address of New Registered	
KA	YUSA, MICHAEL F		81 Name		
1922 VICTORIA AVENUE			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
SUITE A			83		
Į Fī.	MYERS FL 33912				
			84 City	FL	85 Zip Code
Pursuant to the provisions of Soctions 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. SIGNATURE Signature typod or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating). DATE					
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PO	☐ DELETE	1.1 TITLE		Change Addition
NAME STREET ADDRESS	TINCHER, JAMES D. 18660 RIVER ESTATES LANE	:	1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	ALVA FL VD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAMÉ	TINCHER, TERRY A.		2.2 NAME		
STREET ADDRESS	3608 HERITAGE LANE		2.3 STREET ADDRESS	•	
CITY - ST - ZIP	FT. MYERS FL		2. 4 CITY-ST-ZIP		
TITLE NAME	DST TINCHER, RALPH A	☐ DELETE	3.1 TITLE 3.2 NAME		Change Addition
STREET ADDRESS	17585 LEE RD		3.3 STREET ADDRESS		
CITY-ST-ZIP	FT MYERS FL		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIP YITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		j
CITY-ST-ZIP		☐ DELETE	5.4 CITY-ST-ZIP		Change Addition
TITLE NAME		☐ DETEIE	6.1 TITLE 6.2 NAME		Change Addition
STREET ADDRESS			6.3 STREET ADDRESS		

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 one an attachment with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Apr 28 1998 8:00am

Secretary of State