SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION RT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortnam

Secretary of State

DIVISION OF CORPORATIONS

ANNUAL REPOR
1996

DOCUMENT # H73295 (8) ADVANCED BUILDING ERECTORS, INC.										
rincipal Place	e of Business		Ma	lling Address						
8150 PRESIDENTS DR ORLANDO FL 32809			8150 PRESIDENTS DR ORLANDO FL 32809							
							3. Date Incorporated or Qualif-			ast Report
Principal Pl	lace of Busine		28	Mailing Address	·-·		08/26/1985 4. FEI Number		6/01/	1995 Applied For
j			26	g			59-2591398		 	Not Applicable
Suite, Apt.	#, etc.		├ ──┐	Suite, Apt #, etc			5. Certificate of Status Desired	Г٦		.75 Additional
City & State				27						ee Required
Ony & State	c		28	City & State			Election Campaign Financin Trust Fund Contribution	g 🗌	\$5.00 May Be Added to Fees	
Ζιρ		Country		Zip	Cou	untry	8. This corporation has liability	for intangible		
		25	29		30	Т	Florida Stalutes	Yes [] No	
		and Address of Curre	ent Registi	ered Agent		81 Name	10. Name and Address of New	Registered	Agent	
	CKAY, JOH					82 Street A	iddress (P.O. Box Number is Not Accep			
	150 presid Rlando fl					62 Street A	ladaress (P.O. Box Number is Not Accep	лаше)		
U	NLANDO FL	. 32009				83	*			
						84 City			85	Zip Code
1. Pursuant t	to the provision	ons of Sections 607.05	02 and 60	7.1508, Florida Stat	utes, the at	pove-named c	orporation submits this statement for th	FL e purpose of	changi	ng its registered
office or re agent I ar SiGNATURE	egistered agi im familiar wit	ons of Sections 607.05 ant, or both, in the State h, and accept the oblig	e of Florida gations of,	a Such change was Section 607.0505, I	authorized Torida Stati	l by the corpo utes.	orporation submits this statement for the ration's board of directors. I hereby accepted when reinstating)	e purpose of	changi	ng its registered I as registered
office or re agent I ar	egistered agi im familiar wit	ent, or both, in the State h, and accept the oblig	e of Florida gations of, gent and title if	a Such change was Section 607.0505, applicable (F	authorized Torida Stati	l by the corpo utes.	ration's board of directors. Thereby acc	e purpose of cept the appo	changi	l as registered
office or reagent. I as	egistered agr im familiar wit Signature typed	ont, or both, in the State h, and accept the oblig or primed have of registered ag OFFICERS At	e of Florida gations of, gent and title if	a Such change was Section 607.0505,	authorized forida Stati OTE Registere 13.	If the corporate of Agent signature of Agent signat	ration's board of directors. I hereby acc	e purpose of cept the appo	changi ontmen	l as registered
office or reagent. I an agent.	egistered agr m familiar wit Signature Typed P MCKAY	ont, or both, in the State h, and accept the oblig or primed have of registered as OFFICERS AR	e of Florida gations of, gent and title if	a Such change was Section 607.0505, applicable (F	authorized forida Stati OFE Registere 13. 11 TI	d Agent signature of the table of the table of the table of table	ration's board of directors. I hereby acc	e purpose of cept the appo	changi ontmen	I as registered CTORS IN 12
office or reagent. I an agent. I an IGNATURE 2. TLE AME IREET ADDRESS	egistered agrim familiar wit Signature typed P MCKAY 7044 B	ont, or both, in the State h, and accept the oblig or printed name of registered ago OFFICERS AT A JOHN AYSHORE DR.	e of Florida gations of, gent and title if	a Such change was Section 607.0505, applicable (F	authorized Florida Stati OTE Registere 13. 11 Ti 12 N 13 S	d Agrent signature of the composition of the compos	ration's board of directors. I hereby acc	e purpose of cept the appo	changi ontmen	I as registered CTORS IN 12
office or reagent I are agent I are IGNATURE 2. TLE AME REET ADDRESS TY-ST-ZIP	egistered agr m familiar wit Signature Typed P MCKAY	ont, or both, in the State h, and accept the oblig or printed name of registered ago OFFICERS AT A JOHN AYSHORE DR.	e of Florida gations of, gent and title if	a Such change was Section 607.0505, applicable (F	authorized Florida Stati OTE Registere 13. 11 Ti 12 N 13 S	d Agent signature in the Agent signature in the	ration's board of directors. I hereby acc	e purpose of cept the appo	changi pintmen D DIRE	I as registered CTORS IN 12
office or reagent I are agent I are IGNATURE 2. TLE AME REET ADDRESS TY-ST-ZIP TLE	P MCKAY 7044 B ST. CLI ST EATON	ont, or both, in the State h, and accept the oblig or printed name of registered as OFFICERS AT AYSHORE DR. OUD FL.	e of Florida gations of, gent and title if	a Such change was Section 607.0505, applicable (*) TORS DELETE	authorized forida Stati OTE Registre 13. 11 Ti 12 N 13 S	If by the corpoutes. If Agent signature in the Agent signature in the AME ITREET ADDRESS ITY - ST - ZIP ITLE	ration's board of directors. I hereby acc	e purpose of cept the appo	changi pintmen D DIRE	Las registered CTORS IN 12 Lange Additio
office or reagent I are agent I are ignature 2. TLE AME REET ADDRESS TY-ST-ZIP TLE AME REET ADDRESS	P MCKAY 7044 B ST. CLI ST EATON 1749 LI	ont, or both, in the State h, and accept the oblig or proves have a registered as OFFICERS AT AYSHORE DR. DUD FL. , STEPHEN EE JANZEN DR.	e of Florida gations of, gent and title if	a Such change was Section 607.0505, applicable (*) TORS DELETE	authorized Florida Stati OTE Registre 13. 11 TI 12 N 13 S 14 C 21 TI 22 N	If by the corpoutes. If Agent signature in the Agent signature in the AME ITREET ADDRESS ITY - ST - ZIP ITLE	ration's board of directors. I hereby acc	e purpose of cept the appo	changi pintmen D DIRE	Las registered CTORS IN 12 Lange Additio
office or reagent I are agent I are IGNATURE 2. TLE AME IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP	P MCKAY 7044 B. ST. CLE ST EATON 1749 LI KISSIM	ont, or both, in the State h, and accept the oblig or proves have a registered as OFFICERS AT AYSHORE DR. DUD FL. , STEPHEN EE JANZEN DR.	e of Florida gations of, gent and title if	a Such change was Section 607.0505, appl-cabit: (*) TORS	authorized Florida Stati OTE fing state 13. 1111 12N 13S 14C 21Ti 22N 23S 24C	If by the corpoutes. If Agent signature in the Ame Theet Address If ST-ZIP THE THEET ADDRESS OTY-ST-ZIP	ration's board of directors. I hereby acc	e purpose of cept the appo	changi ointmen	CTORS IN 12 lange Additio
office or reagent. I are agent. I are agent. I are iGNATURE. 2. TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE IREET ADDRESS ITY-ST-ZIP TLE	P MCKAY 7044 B. ST. CLE ST EATON 1749 LI KISSIM	ont, or both, in the State h, and accept the oblig or proved have at registered as OFFICERS AT AYSHORE DR. DUD FL. STEPHEN EE JANZEN DR. MEE FL.	e of Florida gations of, gent and title if	a Such change was Section 607.0505, applicable (*) TORS DELETE	authorized Florida Stati OTE flog state 13. 1111 12N 13S 14C 21Ti 22N 23S 24C 31Ti	If by the corpoutes. If Agent signature in the Ame Theet Address If ST-ZIP If LE AME THEET ADDRESS ITY-ST-ZIP THEET ADDRESS CITY-ST-ZIP ITLE	ration's board of directors. I hereby acc	e purpose of cept the appo	changi ointmen	Las registered CTORS IN 12 Lange Additio
office or reagent. I are agent.	P MCKAY 7044 B. ST. CLE ST EATON 1749 LI KISSIM VP EATON	ant, or both, in the State h, and accept the oblig or primed have of registered as OFFICERS AT AYSHORE DR. DUD FL. STEPHEN EE JANZEN DR. MEE FL. PAMELA	e of Florida gations of, gent and title if	a Such change was Section 607.0505, appl-cabit: (*) TORS	authorized Florida Stati OFE Hogistime 13. 11Ti 12N 13S 14C 21Ti 22N 23S 24C 31Ti 32N	If by the corpoutes. If Agent signature in the Ame Theet Address If ST-ZIP If LE AME THEET ADDRESS ITY-ST-ZIP THEET ADDRESS CITY-ST-ZIP ITLE	ration's board of directors. I hereby acc	e purpose of cept the appo	changi ointmen	CTORS IN 12 lange Additio
office or reagent I are agent	P MCKAY 7044 B. ST. CLE ST EATON 1749 LI KISSIM VP EATON	OFFICERS AT OFFICE	e of Florida gations of, gent and title if	a Such change was Section 607.0505, appl-cabit: (*) TORS	authorized Florida Stati OTE Hogistime 13. 11Ti 12N 13S 14C 21Ti 22N 23S 24C 31Ti 32N 33S	If by the corpoutes. If Agent signature in the corpoutes. If Agent signature in the corporation in the cor	ration's board of directors. I hereby acc	e purpose of cept the appo	changi ointmen	CTORS IN 12 lange Additio
office or reagent I are agent	P MCKAY 7044 B ST. CLC ST EATON 1749 LI KISSIM VP EATON 1749 LI 1749 LI	OFFICERS AT OFFICE	e of Florida gations of, gent and title if	a Such change was Section 607.0505, appl-cabit: (*) TORS	authorized Florida Stati OTE Hogistime 13. 11Ti 12N 13S 14C 21Ti 22N 23S 24C 31Ti 32N 33S	IT by the corpoutes. IT LE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP TREET ADDRESS CITY-ST-ZIP TREET ADDRESS CITY-ST-ZIP	ration's board of directors. I hereby acc	e purpose of cept the appo	changi cintmen	CTORS IN 12 lange Additio
office or reagent. I are agent.	P MCKAY 7044 B ST. CLC ST EATON 1749 LI KISSIM VP EATON 1749 LI 1749 LI	OFFICERS AT OFFICE	e of Florida gations of, gent and title if	a Such change was Section 607.0505, angleatair: (https://doi.org/10.0505) DELETE DELETE DELETE DELETE	authorized Florida Stati OTE Hogistime 13. 11Ti 12N 13S 14C 21Ti 22N 23S 24C 31Ti 32N 33S 34.6 41Ti 42N	If by the corpoutes. If Agent signature in the Ame Theet Address If Y-ST-ZIP If LE AME THEET ADDRESS ITY-ST-ZIP If LE AME THEET ADDRESS CITY-ST-ZIP IT LE AME THEET ADDRESS CITY-ST-ZIP IT LE AME THEET ADDRESS CITY-ST-ZIP	ration's board of directors. I hereby acc	e purpose of cept the appo	changi cintmen	CTORS IN 12 lange Addition
Office or reagent. I are agent.	P MCKAY 7044 B ST. CLC ST EATON 1749 LI KISSIM VP EATON 1749 LI 1749 LI	OFFICERS AT OFFICE	e of Florida gations of, gent and title if	a Such change was Section 607.0505, angleatair: (https://doi.org/10.0505) DELETE DELETE DELETE DELETE	authorized Florida Stati OTE Higistime 13. 11Ti 12N 13S 14C 21Ti 22N 23S 24C 31Ti 32N 33S 34 C 41Ti 42N 43S	IT by the corpoutes. IT Agent signature it. IT Agent signature it. IT AGENT ADDRESS ITY ST-ZIP IT AME ITHEET ADDRESS ITY ST-ZIP IT AME ITHEET ADDRESS ITY ST-ZIP ITHE ITHEET ADDRESS	ration's board of directors. I hereby acc	e purpose of cept the appo	changi cintmen	CTORS IN 12 lange Addition
Office or reagent. I are agent.	P MCKAY 7044 B ST. CLC ST EATON 1749 LI KISSIM VP EATON 1749 LI 1749 LI	OFFICERS AT OFFICE	e of Florida gations of, gent and title if	a Such change was Section 607.0505, angleatair: (https://doi.org/10.0505) DELETE DELETE DELETE DELETE	authorized	If by the corpoutes. If Agent signature in the Amme ITHEET ADDRESS ITY-ST-ZIP ITLE AMME ITHEET ADDRESS CITY-ST-ZIP ITLE AMME ITHEET ADDRESS CITY-ST-ZIP ITLE ITHEET ADDRESS CITY-ST-ZIP ITLE ITHEET ADDRESS CITY-ST-ZIP ITLE ITHEET ADDRESS ITY-ST-ZIP ITLE ITHEET ADDRESS ITY-ST-ZIP ITLE ITHEET ADDRESS ITY-ST-ZIP ITTEET ADDRESS ITY-ST-ZIP	ration's board of directors. I hereby acc	e purpose of cept the appo	changiointmen D DIRE Cr	CTORS IN 12 lange Additionange
Office or reagent. I are agent.	P MCKAY 7044 B ST. CLC ST EATON 1749 LI KISSIM VP EATON 1749 LI 1749 LI	OFFICERS AT OFFICE	e of Florida gations of, gent and title if	a Such change was Section 607.0505, applicability (#TORS DELETE DELET	authorized Florida Stati OTE Higistime 13. 11Ti 12N 13S 14C 21Ti 22N 23S 24C 31Ti 32N 33S 34 C 41Ti 42N 43S	IT by the corpounds. IT Agent signature it. IT Agent signature it. IT AGET ADDRESS ITY ST-ZIP IT AME IT ADDRESS ITY ST-ZIP IT LE	ration's board of directors. I hereby acc	e purpose of cept the appo	changiointmen D DIRE Cr	CTORS IN 12 lange Additionange
Office or reagent. Lar agent. Lar agent. Lar l	P MCKAY 7044 B ST. CLC ST EATON 1749 LI KISSIM VP EATON 1749 LI 1749 LI	OFFICERS AT OFFICE	e of Florida gations of, gent and title if	a Such change was Section 607.0505, applicability (#TORS DELETE DELET	authorized	IT by the corpounds. IT Agent signature it. IT Agent signature it. IT AGET ADDRESS ITY ST-ZIP IT AME IT ADDRESS ITY ST-ZIP IT LE	ration's board of directors. I hereby acc	e purpose of cept the appo	changiointmen D DIRE Cr	CTORS IN 12 lange Additionange
Office or reagent. I are agent.	P MCKAY 7044 B ST. CLC ST EATON 1749 LI KISSIM VP EATON 1749 LI 1749 LI	OFFICERS AT OFFICE	e of Florida gations of, gent and title if	a Such change was Section 607.0505, application (P. TORS DELETE DELET	authorized	IT by the corpountes. IT Agent signature of Agent	ration's board of directors. I hereby acc	e purpose of cept the appo	changi cintmen	CTORS IN 12 lange Additionange
office of reagent. I are agent.	P MCKAY 7044 B ST. CLC ST EATON 1749 LI KISSIM VP EATON 1749 LI 1749 LI	OFFICERS AT OFFICE	e of Florida gations of, gent and title if	a Such change was Section 607.0505, applicability (#TORS DELETE DELET	authorized	IT by the corpoutes. IT Agent signature it. IT Agent signature it. IT ADDRESS ITY ST-ZIP IT ADDRESS ITY ST-ZIP IT AMME IT ADDRESS ITY ST-ZIP	ration's board of directors. I hereby acc	e purpose of cept the appo	Changiointmen D DIRE Cr Cr	CTORS IN 12 lange Additionange
Office or reagent I are agent	P MCKAY 7044 B ST. CLC ST EATON 1749 LI KISSIM VP EATON 1749 LI 1749 LI	OFFICERS AT OFFICE	e of Florida gations of, gent and title if	a Such change was Section 607.0505, application (P. TORS DELETE DELET	authorized	IT by the corpounds. IT Agent signature of Agent Siry - ST - Zip of Amelia of Agent Siry - ST - Zip of Agent Siry - Zip of Agent Siry - Zip of Agent S	ration's board of directors. I hereby acc	e purpose of cept the appo	Changiointmen D DIRE Cr Cr	CTORS IN 12 lange Additionange
office or re agent I ar GNATURE	P MCKAY 7044 B ST. CLC ST EATON 1749 LI KISSIM VP EATON 1749 LI 1749 LI	OFFICERS AT OFFICE	e of Florida gations of, gent and title if	a Such change was Section 607.0505, application (P. TORS DELETE DELET	authorized	IT by the corpounds. IT Agent signature of Agent State of Ag	ration's board of directors. I hereby acc	e purpose of cept the appo	Changiointmen D DIRE Cr Cr	CTORS IN 12 lange Additionange

SIGNATURE:

SIGNATURE AND TYPED OR PHINNED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN MAN 107. 855-9109

Day 107. 855-9109