COF ANNI	E NOW: FILING FEE A PROFIT RPORATION UAL REPORT 1999 MENT # H74508		R MAY 1ST IS FLORIDA DEPAF Katheri Secretar DIVISION OF (RTMENT ne Har y of Stat	OF S ris	STATE	FI Mar 22, Secreta 03-22-1999 9) 8:00 f Sta	
Principal Plac	A CONSTRUCTION CORP.		ailing Address 10 BARBOUR ROAD 25T PALM BEACH FL 33							u n un ing
JS	JEACH FL 33407	US					DO NOT WRI 3. Date incorporated or Qualifed 08/30/1985	TE IN THIS	SPACE	
_ '	Place of Business		Mailing Address				4. FEI Number			Applicable
1 Suite, Apt.	# etc.	26	Suite, Apt. #, etc.				59-2589949		\$8.75 A	
2		27					5. Certifcate of Status Desired		Fee Rec	
City & Sta	ite	28	City & State		-		6. Election Campaign Financing Trust Fund Contribution		\$5.00 i Added to	
3 Zip	Country		Zip	C01	untry		8. This corporation owes the curr	ent year inta	angible	
4	25	29		30			Personal Property Tax. 10. Name and Address of New F	egistered .		
	9. Name and Address of Curren	nt Regis	stered Agent		81	Name	TO, Maine and Address of New F			
	OGH, STEVEN L				82	Street Add	ress (P.O. Box Number is Not Accepta	uble)		
	54 KESWICK WAY M BEACH GARDENS FL 33412				83		·			
1.04							<u>,</u>			
					84	City		1 11	85 Zip C	one
11, Pursuan	t to the provisions of Sections 607.05	02 and 6	507.1508, Florida Statut	es, the e		-named corp	poration submits this statement for the	FL purpose of	changing its (registered
office or agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the obligi Signature, typed or printed name of registered age	ations of Flori	da. Such change was a f, Section 607.0505, Flo if applicable. (NOTE	rida Stat	d by 1 lutes.	ine corporati	d when reinstating)	purpose of ot the appoin		
office or agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the obligi Signature, typed or printed name of registered age OFFICERS A	ations of Flori	da. Such change was a f, Section 607.0505, Flo if applicable. (NOTE	utnorize rida Stat	d by t tutes. t Agent	ine corporati	on s board of directors. I mereby acces	purpose of ot the appoin		
office or agent. I a SIGNATURE 12. TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligi Signeture, typed or printed name of registered age OFFICERS AI PD BALOGH, STEVEN	ations of Flori	da. Such change was a f, Section 607.0505, Flo if epplicable. (NOTE ECTORS	Registeree 13. 1.1 T 1.2 N	d by t tutes. 1 Agent MLE AME		d when reinstating)	purpose of ot the appoin		RS IN 12
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