## 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 ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

**FILED** Jul 02 1996 8:00 am Secretary of State

DOCUMENT # 1. Corporation Name

H78386

(0)

MATER	BUILDERS,	INC.
in all Dra		

Principal PI	ace of Business	Mail no	Add			1,18,18,11,18,18,18,18,18,18,18,18,18,18			l
11412 W. SAMPLE ROAD CORAL SPRINGS FL 33065 US		1141	Mailing Address  11412 W. SAMPLE ROAD  CORAL SPRINGS FL 33065  US						
2. Principal	Place of Business					<ol> <li>Date Incorporated or Qualified</li> <li>09/27/1985</li> </ol>	1	e of Last Report /24/1995	
21		28. Mai:	ing Address			4. FEI Number		Applied For	
Suite, Ap	ot. #, etc	<del></del>	e, Apt.#, etc.		··	59-2605947		Not Applica	ble
22 City & St.	ale	27	& State		·	5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23		28	o orate			6. Election Campaign Financing	<u></u>	\$5.00 May Be	
Zip	Country	Zip		Country	,	Trust Fund Contribution		Added to Fees	]
24	25	29		30		8. This corporation has liability for Florida Statutes	intangible ta		
	9. Name and Address of Cu	rrent Registered	Agent			10. Name and Address of New R		No	
	MAYER, MICHAEL			81	Name		and the	Jenit	
· )	11412 W. SAMPLE ROAD			62	Street A	ddress (P.O. Box Number is Not Acceptal	blo		
,	CORAL SPRINGS FL 33065			-		The state of the s	ole)		- 1
1				83		·			-1
•				84	City			85 Zip Code	
11. Pursuan	to the provisions of Sections 607.0	0502 and 607.150	8, Florida Stalute	s, the above	named c	orporation submits this statement for the plation's board of directors. I because			
agent I	am familiar with, and accept the ob	ate of Florida, Suc Junetrous of, Section	h change was at	ithorized by	he corpo	orporation submits this statement for the praction's board of directors. I hereby accep	urpose of ch. Lithe appoint:	anging its registered	
SIGNATURE		La Comp	Z	rua statutes		,	1 1	and the regions ee	ĺ
12.	Asignature, type for printed name of registered		ple (POIF	Registered Ager	it sign iture re	equited when reinstarings	TIATE -		_
TIFLE	OFFICERS A	AND DIRECTORS	<del></del>	13.		ADDITIONS/CHANGES TO OFFIC		RECTORS IN 12	
NAME	MAYER, MICHAEL		DETELE	1 1 TITLE			72.107.110	Change Addition	i
STREET ADDRESS	11412 W. SAMPLE RD			1 2 NAME	- 1		_	, J L	
CITY-ST-ZIP	CORAL SPRINGS FL			13 STREET	DDRESS				
TITLE	3015C 0111100 1E		DELETE	14 CITY - SI	· ZIP				
NAME			breen	2 1 THILE				Change Add-tio	_  č
STREET ADDRESS	•			2.2 NAME					
CITY - ST - ZIP				2.3 STREET A					-
TITLE			DELETE	2 4 C/TY - ST 3 1 TITLE	- ZIP				
NAME				3 2 NAME			L.J	Change Addition	n [
STREET ADDRESS				33 STREET A	DDRESS				
CITY - ST - ZIP		·		3.4 City-St					
TITLE NAME		7	DELETE	4.1 TITLE				Change Addition	
STREET ADDRESS				4 2 NAME	ł		<b>ـــ</b> ـا	Change Accusor	'
CITY-ST-ZIP				4.3 STREET A	ODRESS				
TITLE			7 50 55	4 4 CITY - ST -	ZIP				
NAME		Ĺ	DELETE	5 1 THILE				Change Addition	$\exists$
STREET ADDRESS				5.2 NAME	1				
CITY-ST-ZIP				5 3 STREET A!					
TITLE			DELETE	5.4 CITY - ST-	?IP				
NAME		L		6.1 TITLE		10000188	3791	Change Addition	1
STREET ADDRESS				6.2 NAME		10000188 -07/03/960107	7018	•	
CITY-ST-ZIP				6 3 STREET AD	- 1	***225.00			İ
4. do hereb	certify that the information supplic	od with this filing is	a voluntorila tama	64CITY-SI-	IP I				

further 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 1 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 that my name appears in Block 12 of Block 13 if changed, or op an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAL OFFICER OR DIRECTOR