

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

|                                             |                                                                                   |                                                                                                    |
|---------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| CORPORATION<br>ANNUAL REPORT<br><b>1995</b> |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Northam<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|---------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|

APPROVED  
AND  
FILED

95 MAY 11 AM 11:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **H82524** (0)

1. Corporation Name:

**GEORGE RIES CONSTRUCTION, INC.**

Principal Place of Business:

**12458 71ST PL. NORTH  
WEST PALM BEACH FL 33412  
US**

Mailing Address:

**12458 71ST PL. NORTH  
WEST PALM BEACH FL 33412  
US**

DO NOT WRITE IN THIS SPACE

|                                                                                                                                                               |                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| 3. Date incorporated or qualified<br><b>10/25/1985</b>                                                                                                        | 3a. Date of Last Report<br><b>07/29/1994</b>                      |
| 4. FFI Number<br><b>NOT APPLICABLE</b>                                                                                                                        | Applied For<br><input checked="" type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                     | <b>\$8.75 Additional<br/>Fee Required</b>                         |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                            | <b>\$5.00 May Be<br/>Added to Fees</b>                            |
| 7. The corporation has liability for intangible tax under S. 199.032,<br>Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                                                                   |

|                                                |                                                |
|------------------------------------------------|------------------------------------------------|
| 2. Principal Place of Business:                | 2a. Mailing Address:                           |
| 21. <b>13175 87th St. N.</b>                   | 25. <b>13175 87th St. N.</b>                   |
| 22. Suite, Apt. #, etc.                        | 26. Suite, Apt. #, etc.                        |
| 23. City & State<br><b>West Palm Beach, FL</b> | 27. City & State<br><b>West Palm Beach, FL</b> |
| 24. Zip<br><b>33412</b>                        | 28. Zip<br><b>33412</b>                        |
| 25. Country<br><b>USA</b>                      | 29. Country<br><b>USA</b>                      |

9. Name and Address of Current Registered Agent

**RIES, GEORGE E.  
12458 71ST PLACE NORTH  
WEST PALM BEACH FL 33412**

10. Name and Address of New Registered Agent

|                                                                                  |
|----------------------------------------------------------------------------------|
| 81. Name<br><b>George E. Ries</b>                                                |
| 82. Street Address (P.O. Box Number is Not Acceptable)<br><b>13175 87th St N</b> |
| 83.                                                                              |
| 84. City<br><b>West Palm Beach, FL</b>                                           |
| 85. Zip Code<br><b>33412</b>                                                     |

11. Pursuant to the provisions of Sections 607.0507 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

*George E. Ries* President *George E. Ries*

5/4/95

| 12. OFFICERS AND DIRECTORS                      |                                                      | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |                                                                              |
|-------------------------------------------------|------------------------------------------------------|--------------------------------------------------------|------------------------------------------------------------------------------|
| 101. NAME<br><b>RIES, GEORGE E.</b>             | 102. STREET ADDRESS<br><b>12458 71ST PLACE NORTH</b> | 101. NAME<br><b>RIES, GEORGE E.</b>                    | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 103. CITY, ST, ZIP<br><b>WEST PALM BEACH FL</b> |                                                      | 102. STREET ADDRESS<br><b>13175 87th St N.</b>         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 104. NAME                                       |                                                      | 103. CITY, ST, ZIP<br><b>West Palm Beach, FL 33412</b> | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 105. NAME                                       |                                                      | 104. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 106. NAME                                       |                                                      | 105. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 107. NAME                                       |                                                      | 106. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 108. NAME                                       |                                                      | 107. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 109. NAME                                       |                                                      | 108. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 110. NAME                                       |                                                      | 109. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 111. NAME                                       |                                                      | 110. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 112. NAME                                       |                                                      | 111. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 113. NAME                                       |                                                      | 112. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 114. NAME                                       |                                                      | 113. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 115. NAME                                       |                                                      | 114. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 116. NAME                                       |                                                      | 115. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 117. NAME                                       |                                                      | 116. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 118. NAME                                       |                                                      | 117. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 119. NAME                                       |                                                      | 118. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 120. NAME                                       |                                                      | 119. NAME                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(b), 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 recipient of further information to complete this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, if changed, or on an attachment with my change.

SIGNATURE:

*George E. Ries* President *George E. Ries*

5/4/95

407-771-1055