

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



91-98
FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 JAN -7 PM 3:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # H88942 (8)

1. Corporation Name
EXPERT CONSTRUCTION COMPANY, INC.

Principal Place of Business

P.O. BOX 551
KEY LARGO FL 33037
US

Mailing Address

P.O. BOX 551
KEY LARGO FL 33037
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

MILLER, ROBERT K
2975 OVERSEAS HWY.
MARATHON FL 33050

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1106, 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 607.0502, Florida Statutes.

SIGNATURE

Signature type for professional agent or lawyer must be completed

(If not a professional agent or lawyer, no signature required)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD
KRUSZELNICKI, CHRIS
98990 OVERSEAS HIGHWAY
KEY LARGO FL

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

13.

11 NAME

12 NAME

13 STREET ADDRESS

14 CITY- ST- ZIP

15 NAME

16 NAME

17 STREET ADDRESS

18 CITY- ST- ZIP

19 NAME

20 NAME

21 STREET ADDRESS

22 CITY- ST- ZIP

23 NAME

24 NAME

25 STREET ADDRESS

26 CITY- ST- ZIP

27 NAME

28 NAME

29 STREET ADDRESS

30 CITY- ST- ZIP

31 NAME

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

35 NAME

36 NAME

37 STREET ADDRESS

38 CITY- ST- ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

800002394838-5

-01/08/98-01118-011

****900.00 ****900.00

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 149.02(3)(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 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 on an attachment with an address.

SIGNATURE

Expert Const. Co., Inc.

P.O. Box 551

Key Largo FL 33037

CR2E034 (4/97)