FILED

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H98058

1. Corporation Name

KIRBY KING CONSTRUCTION, INC.

Principal Place	e of Business	Mailing Address				nifit filðis bifit nigti nifit ðjætt sæn	,
434 SE 21ST P VERO BEACH F US		434 SE 21ST PL VERO BEACH FL 32962 US			DO NOT WRITE IN	THIS SPACE	
	المساملينية المراكبة المراكبة				3. Date incorporated or Qualifed 02/06/1986		. •
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number 59-2759941	Applied For Not Applicable	e
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 3	Country 0		This corporation owes the current yes Personal Property Tax.	¥Yes □No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Regis	tered Agent	4
MINIC	ENAPETH I VNN		81	Name			
KING, ELIABETH LYNN 434 SE 21 PL		82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
VER	O BEACH FL 32962		83				
	•		84	City		FL 85 Zip Code	7
Office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State o im familiar with, and accept the obligation	' Florida. Such chande was auti	nonzea ov	the corporation	oration submits this statement for the purpor's board of directors. I hereby accept the	ose of changing its registered appointment as registered	-
SIGNATURE		APATE D	agistand Ages	t signature required	(when coinstation)	ATE .	
40	Signature, typed or printed name of registered agent OFFICERS AND		13.	r signature required	ADDITIONS/CHANGES TO OFFICE		ᅥ
12.	DP OFFICERO AND	DELETE	1.1 TITLE		ADDITIONO/ON WINGLE TO OFF THE	Change Addition	on
NAME	KING, KIRBY		1.2 NAME				ļ
STREET ADDRESS	434 SE 21ST PLACE		1.3 STREET	ADDRESS			
CITY-ST-ZIP	AMPA DELANTE		1.4 CITY-S	T-ZIP			
TITLE	VP	☐ DELETE	2.1 TITLE			☐ Change ☐ Additi	on
NAME	ELIZABETH KING		2.2 NAME				
STREET ADDRESS	434 SE 21ST PLACE		2.3 STREET	ADDRESS			
CITY-ST-ZIP	VERO BEACH FL	_	2.4 CITY-S	T-ZIP			╝
TITLE		☐ DELETE	3.1 TITLE			☐ Change ☐ Additi-	on
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADORESS			
CITY-ST-ZIP			3.4. CITY-S	T-ZIP			_
TITLE		DELETE	4.1 TITLE			Change Additi	on:
NAME		*/	4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			- }
CITY-ST-ZIP			4.4 CITY-S				
TITLE				T-ZIP		Change (7 Additi	_
NAME		☐ DELETE	5.1 TTLE	r-ZIP		☐ Change ☐ Additi	on
		☐ DELETE	5.1 TITLE 5.2 NAME			☐ Change ☐ Additi	on
STREET ADDRESS		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET	ADDRESS			on
STREET ADDRESS CITY-ST-ZIP	<u> </u>		5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S	ADDRESS			
STREET ADDRESS		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET	ADDRESS			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS