FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J06202

(2)

NIKO CONSTRUCTION, INC.

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FILED Apr 16 1998 8:00am Secretary of State

THICO Y	oonomoonon, mo.								
Principal Plac	ce of Business	Mailing Address				1 1001110 0111 00110 01110 11011 00110 1101 01011	IEIL AIDIS AFREI ÓI	Ell Billi (BE)	
413 CANTEBURY LANE		P.O. BOX 277							
GULF BREEZ	E FL 32561	GULF BREEZE FL	. 325 62-0277			DO NOT WORK IN THE			
U\$		US				DO NOT WRITE IN TH	IS SPACE		_
						3. Date Incorporated or Qualified 03/27/1986			
	Place of Business	2a. Mailing Addre	S S			4. FEI Number		Applied For	_
21	N1-	26				<u>59-2778526</u>		Vot Applicable	3
Sulte, Apt. #, etc.		<u>├</u> ─┐	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional	1
City & State		City & State						Required	4
23		<u></u>				6. Election Campaign Financing Trust Fund Contribution		May Be	
Zip	Country	28 Zin	Zip Country					to Fees	4
24	25	29	30	· i.i y		 This corporation owes or has paid the operation of the Personal Property Tax due June 30. 		ntangible [4] No	
24	9, Name and Address of Curren		1301			10. Name and Address of New Registere		<u> </u>	\dashv
н	RRAS, NICK M.			81 N	Vame				1
	3 CANTERBURY LANE		-						╛
	JLF BREEZE FL 32561			62 S	Street Addres	ss (P.O. Box Number is Not Acceptable)			
	JAN SAME COLON			B3					4
				84 0	Dity	F	85 Zip	Code	
11. Pursuant office or a agent. I a	to the provisions of Sections 607.050; registered agent, or both, in the State am familiar with, and accept the oblige	2 and 607.1508, Florida of Florida. Such chang ations of, Section 607.0	Statutes, the ab e was authorized 505, Florida Statu	ove-national by that otes.	amed corpor ne corporation	ration submits this statement for the purpose n's board of directors. I hereby accept the a		its registered s registered	1
SIGNATURE									
	Signature, typed or printed name of registered ager		(NO1E: Registered	Agent s	ignature required				⅃ℴ
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.		·····	ADDITIONS/CHANGES TO OFFICERS A] §
TITLE	PSD MIDDAG NICK M	☐ DELI	1.1 ¥II	LE			Change	Addition	}
NAME	HIRRAS, NICK M.		1.2 NA	ME					[5
STREET ADDRESS	413 CANTERBURY LANE		1.3 STF	REET ADD	DRESS				Į
CITY-ST-ZIP	GULF BREEZE FL			1.4 CITY-ST-ZIP					<u>ا</u> ةِ ل
TITLE	SVD	☐ DELI					L. Change	Addition	10
NAME	SMITH, MENA D.		2.2 NA						
STREET ADDRESS	1207 ORIOLE BEACH RD. GULF BREEZE FL		23 STF	EET ADE	DRESS				
CITY-ST-ZIP	GULF BREEZE FL	I Sau		Y-ST-Z	ZIP				4
TITLE		☐ DELE					Change	☐ Addition	
NAME			3.2 NA						
STREET ADDRESS				EET ADD					
CITY-ST-ZIP				Y - ST - Z	ZIP			<u> </u>	↲
TITLE		L] DELE	1				L. Change	☐ Addition	
NAME			4. 2 NA	ME					1
STREET ADDRESS				EET ADD					
CITY-ST-ZIP		——————————————————————————————————————		Y-ST-ZI	IP .				1
TITLE		☐ DELE					Change	Addition	
NAME			5.2 NAI						
STREET ADORESS			5.3 STF	EET ADD	DRESS				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		Y-ST-ZI	IP		·- <u></u> ·		_
TITLE		☐ DELE					Change	Addition	
NAME			6.2 NA)	AE					
STREET ADDRESS			6.3 STR	eet add	DRESS				
CITY-ST-ZIP			6.4 CiT	/- ST-ZI	IP				

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 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.

M. Lychar 1 1