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 #

(9)

PEIE	NAMUT FOUNDATIONS AN	U CONCRETE FLOOR	o, INC.		
Principal Plac	e of Business	Mailing Address		T HEOLINE BULL ORGAN YOMEN YOMEN TORAN HINN DIGHT REALL STATE OFFICE ORGAN DIGHT	11 1881
168 MANISTEE STREET 168 MANISTEE STREET					
P.O. BOX 140		P.O. BOX 14068 PANAMA CITY BEACH FL 32413		DO NOT WOLL IN THE SPACE	
PANAMA CITY	PEACH FL 32413			DO NOT WRITE IN THIS SPACE	
		•		3. Date Incorporated or Qualified	
<u> </u>	10			04/11/1986	
	lace of Business	2a. Mailing Address		4. FEI Number Applie	
21		26		- OV EQUITO	oplicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additions Fee Required	
City & State	9	Cily & State		6. Election Campaign Financing \$5.00 Mag	
23		28		Trust Fund Contribution	ees
Zip	Country	Z φ	Country	8. This corporation owes or has paid the current year Intang	
24	25	29	30	Personal Property Tax due June 30. Yes N	0
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered Agent	
HE	ss, Brian D		81 Name	3	
910	8 FRONT BEACH ROAD		82 Street	t Address (P.O. Box Number is Not Acceptable)	
	NAMA CITY BEACH FL 32407		83		
			84 City	FL 85 Zip Cod	le
SIGNATURE	Signature, typed or partited name of regularized a		DTE Registered Agent signatur		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
TITLE	PD	☐ DELETE	1.1 TITLE	Change _	Addition
NAME	HARDY, PETE		1.2 NAME		
STREET ADDRESS	168 MANISTEE STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BEACH FL		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE	☐ Change	Addition 2
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY+ST-ZIP			2 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐	Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4, CITY-ST-ZIP		
TITLE		DELETE	4.1 YITLE	Change _	Addition
NAME	†		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	Change _	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	Change	Addition

64 CITY-ST-ZIP 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.

6.3 STREET ADDRESS

ETEL A. HAROY

FILED

Mar 30 1998 8:00am

Secretary of State

850-866-0259