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NAME

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CITY-ST-ZIP

FILED Apr 24 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J55791 IVAN KAUFFMAN & SONS CONTRACTING. INC. Principal Place of Business Mailing Address C/O IVAN J. KAUFFMAN 1550 GRAND BLVD. C/O IVAN J. KAUFFMAN 1550 GRAND BLVD. DO NOT WRITE IN THIS SPACE SARASOTA FL 34232 SARASOTA FL 34232 3. Date Incorporated or Qualified 01/28/1987 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-2780258 21 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name KAUFFMAN, IVAN J. 1550 GRAND BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34232 83 Zip Code 64 City Pursuant to the provisions of Sections 607.0502 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 1.1 TITLE KAUFFMAN, IVAN J. NAME 1.2 NAME 1550 GRAND BLVD. STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE KAUFFMAN, KENT J. NAME 22 NAME 501 SINCLAIR DR. STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change 3.1 TITLE Addition KAUFFMAN, KURT L. NAME 3.2 NAME 1010 JAKL AVE STREET ADDRESS 3.3 STREET ADDRESS sarasota fl CITY-S1-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE KAUFFMAN, ELOISE S. NAME 4. 2 NAME 1550 GRAND BLVD. STREET ADDRESS 4.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 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

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the Information supplied with this filling 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. IVAN J. KAN FEMON APRIL 18 1998 957-3968