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 # J67294

(5)

BABB'S PLASTERING, INC.

FILED Feb 04 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						-		
3785 WATERMELLON LANE SAMSULA FL 32188		3795 WATERMELLON LNE SAMSULA FL 32168						
U\$		US			DO NOT WRITE IN THIS SPACE			
						3, Date Incorporated or Qualified 04/09/1987		
2. Principal Place of Business 2a, Mailing Ad			ddress			4. FEI Number		pplied For
21		26				59-2799463		ot Applicable
Suite, Apt.	Suite, Apt. #, etc.	e, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·		\$8.75	Additional	
22	27				5. Certificate of Status Desired	Fee R	equired	
City & State	9	City & State			6. Election Campaign Financing	\$5.00	May Be	
23	[28]		Country			Trust Fund Contribution		to Fees
Zip	Country	Zφ	 			8. This corporation owes or has paid the o		
24	25 29 30 2 Name and Address of Current Registered Agent			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
AR'	THUR J LUXTON			81	Name	10. Name and Neerless Street Hegistore	a Agont	
3754 JACKSON ST.								
PORT ORANGE FL 32119				82 Street Address (P.O. Box Number is Not Acceptable)			ľ	
. •				83				
				24	O'4			
				84	City	F	L 85 Zip	Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above- office or registered agent, or both, in the State of Florida Such change was authorized by the agent. Fam family: with accord								its registered registered
SIGNATURE	It while the took	do Atthur	Dha	Li	e ston 6	IR 1/30/98		
Old III III	Signature, typed or priviled name of registered ag	<i>4</i>	TE Registered	d Agent	signature required			i
12.	OFFICERS AN	D DIRECTORS X DELETE	13.			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	LUXTON, RAYMOND F.	ixt offere	1.1 TI				☐ Change	☐ Addition
NAME	8400 MOTA DALLA DONE		1.2 NA		į			[3
STREET ADDRESS	ENGEWATED EI				DDRESS			إإ
CITY-ST-ZIP TITLE	S	DELETE	1.4 CI DELETE 2.1 W		ZIP	····	Change	Addition C
NAME	LUXTON, JAMIE C.	-					Onlings	
STREET ADDRESS	3795 WATERMELON LANE		2.2 NAME 2.3 STREET ADDRESS		nnaecc			
CITY-ST-ZIP	SAMSULA FL		2. 4 City-St-ZiP					
TITLE		DELETE			- 211		Change	Addition
NAME			3.2 NA					
STREET ADDRESS			3.3 STREET ADDRESS		DDRESS			
CITY-ST-ZIP	IP		3.4 CI	3.4 CITY-ST-ZIP				
TITLE		DELETE	4.1 TIT				☐ Change	Addition
NAME			4. 2 NAME		1			
STREET ADDRESS			4.3 ST	REET AC	DDRESS			
CITY-ST-ZIP			4.4 CITY - S		ZIP			
TITLE		DELETE	5.1 117	TLE			Change	☐ Addition
NAME			52 NAME					.
STREET ADDRESS			5 3 ST	REET AD)DRESS			
CITY-ST-ZIP				Y-ST-	ZIP			
TITLE	•	☐ DELET E	6.1 TIT			•	Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 ST	REET AD	DDRESS			
CITY-ST-ZIP				Y-ST-		action 110 07/2Vi). Florida Statutae Liurther	portify that the	informeti

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 of the receiver or trusted employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Plack 12 or Plack 13 it distanced or proan attachment with an address.