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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J69706

(6)

C. FRANKLIN CONSTRUCTION, INC.

FILED Feb 27 1997 8:00am Secretary of State

rancipal riace of bu	15111058	Maning Address	Maning Address										
11853 47TH ROAD NO ROYAL PALM BEACH		11853 47TH ROAD NOF ROYAL PALM BEACH F		1152									
						_	3. Date incorporated or Qualified 04/27/1987 3a. Date of Last Report 02/07/1996						
2. Principal Place of	Business	2a. Mailing Address	1				4. FEI Number				Applied For		
21		26			<del></del>	<b>59-2821244</b> Not Applica							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired See Required							
City & State		City & State	F				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Zip 24	Country 25	Zip 29	30	ountry	,			This corporation has liability for		tax under	rs. 199.032,		
9. (	Name and Address of Curre		1441	1		······································		Name and Address of New F	Registered /	Agent			
FRANKLIN	N, CHARLES			81	Nar	ne							
11853 47TH ROAD NORTH ROYAL PALM BEACH FL 33411					Stre	et Address	ddress (P.O. Box Number is Not Acceptable)						
				64	City	<del></del>	•		FL	85 Zı	ρ Code		
44 Ouround to the	ntanana of Cantiona 607 05	02 and 607 1609 Elacida Cra	tuton the	abov		ad corpor	otion	submits this statement for the		obanoina	r its registered		
office or register	red agent, or both, in the State	e of Florida. Such change wa	as authori	zed by	y the o	orporation	i's bo	pard of directors. I hereby acc	ept the app	ointment i	as registered		
agent. Lam fami	iliar with, and accept the oblig	gations of, Section 607.0505.	Florida S	tatute	<b>S</b> .								
SIGNATURE													
	e, typed or picthes name of logistered ag				ent signa	ture required v		einstating) DDITIONS/CHANGES TO OFF	DATE	DIDECTA	200 W 10		
12.	OFFICERS AN	ID DIRECTORS  DELETE	1:				AI	DUITIONS/CHANGES TO OFF	ICERS AND	Change			
1	WIND OUTDITO	ר"ן הנונוג	- 1	1 TITLE		-				CHAIN!	e L Abomon		
	NKLIN, CHARLES		1.	2 NAME									
	53 4TH ROAD NORTH		1.3	3 STREET	ADDRE	is		•					
CITY-ST-ZIP ROY	YAL PARLM BEACH FL			4 CITY - S	T-ZIP					-			
TITLE		☐ DELETE	2.1	1 TITLE						Change	e L Addition		
NAME			2.5	2 NAME									
STREET ADDRESS			2.3	3 STREET	ADDRE	ss							
CITY-ST-ZIP			2.	4 CITY -	ST-ZIP								
TITLE		DELETE	3.	1 TITLE						Change	e 🔲 Addition		
NAME			3.3	2 NAME									
STHEFT ADDRESS			3	3 STREET	ADDRE	ss							
C-TY - ST - ZIP			3.	4. CITY-1	S1-2#2								
TITLE	**************************************	☐ DELETE		1 TITLE		<b>—</b>				Change	e 🔲 Addilion		
NAME			4.	2 NAME									
STREET ADDRESS				3 STREET		is l							
CITY+SI-ZIP				4 CITY-S		-							
TITLE		DELETE		1 TATLE	)! - T IL					Change	e Addition		
		Carle December											
NAME				2 NAME		,,							
STREET ADDRESS				3 STREET		»							
CITY - ST - ZIP		Tariere		4 CITY - S	51 - 21P		·			Chor-	a Addition		
TILE		☐ DELETE		1 TITLE						Changi	e Addition		
NAME			6:	2 NAME		-							
STREET ADDRESS			6.	3 STREET	I ADDRE	SS							
CITY - ST - ZIP				4 CITY-S									
14 I do baraby cert	ldy that the information supply	ad with this filing doos not ou	calify for t	ho ove	motic	n stated in	Son	tion 139 07(3)(i) Florida Statu	itos Lturiboi	contifu th	et the		

I. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1.9.0/(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate any product of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empoyers to execute this eport as required by Charles 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an appears.

SIGNATURE

MOY RS TYOME IY CHIEF OR DIRECTOR

2/24/97 (561) 793-5098