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PROFIT
CORPORATION
ANNUAL REPORT
1999

DOCUMENT # 169706



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 27, 1999 8:00am Secretary of State

01-27-1999 90026 005 ***150.00

C. FRAN	n Name					
0.1144	IKLIN CONSTRUCTION, INC.					
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Principal Plac		Mailing Address				
11853 47TH RO		11853 47TH ROAD NORTH ROYAL PALM BEACH FL 3		•		
ROYAL PALM (BEACH FL 33411	HUTAL PALM DEACH TE S	99411	DO NOT WRITE IN THIS	SPACE	•
ı				3. Date Incorporated or Qualifed		•
				04/27/1987		
2 Principal P	lace of Business	2a. Mailing Address		4. FEI Number .	Applied	For
21	ado di Basiloss	26	-	59-2821244	Not App	licable
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8.75 Additio	
22	, , ,	27		5. Certifcate of Status Desired	Fee Require	đ
City & Stat	ie.	City & State		6. Election Campaign Financing	\$5.00 May I	Bé
23		28		Trust Fund Contribution	Added to Fee	
Zip	Country	Zip.	Country	8. This corporation owes the current year In	tangible	
24	25	29	30	Personal Property Tax.	☐ Yes ☐ No	0
<u> </u>	9. Name and Address of Current		1771	10. Name and Address of New Registered	Agent	
			81 Name			
ERA	NKLIN, CHARLES	,	00 00 00	Inner (D.O. Bey Number in Net Assertable)		
118	53 47TH ROAD NORTH		82 Street Add	Iress (P.O. Box Number is Not Acceptable)		
	AL PALM BEACH FL 33411		83	14. 14. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	四萬 新加州	51 (1)
•	**					1 37
			84 City	FI	85 Zip Code	
11005 17 5 5	A C - tion - 607 0507	and 607 1509 Florido Statut	too the above-named corr	noration submits this statement for the purpose of	= } f changing its regis	tered
office or	registered agent, or both, in the State of	of Florida. Such change was a	uthorized by the corporati	poration submits this statement for the purpose o ion's board of directors. I hereby accept the appo	intment as register	ed
agent. I a	um familiar with, and accept the obligat	ions of, Section 607.0505, Flo	orida Statutes.			
				,		
SIGNATURE				ed when reinstating) DATE	· · · ·	_ ·
	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE	E: Registered Agent signature require		ND DIRECTORS I	— N 12
12.	OFFICERS AN	t and title if applicable. (NOTE D DIRECTORS	: Registered Agent signature requin	ADDITIONS/CHANGES TO OFFICERS A		N 12 Addition
12. ΠΠ.Ε	OFFICERS ANI	t and title if applicable. (NOTE	E: Registered Agent signature require 13. 1.1 TITLE			
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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 altachment with an eddress, with all other like empowered.

SIGNATURE:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/2/99 (561) 793 - 509 E