## **FILED** ·FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** May 18 1998 8:00am ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS **1998** DOCUMENT # J89760 (9) NORTHRIDGE CONSTRUCTION, INC. Principal Place of Business Mailing Address -6701 N PINE ISLAND RD 6701 N PINE TSLAND FID **GUITE 390** SUITE 330 TAMARAC FL 99824 JAMARAC PL 33321 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/28/1987 Mailing Address 4. FEI Number Applied For 59-2841081 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required SAME 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Yes 30 Personal Property Tax due June 30. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RICKEL, ROBERT S. 1140 NORTHWEST 101 AVE. Street Address (P.O. Box Number is Not Acceptable) 82 **PLANTATION FL 33322** 83 Zip Code 11. 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NCH): Registered Agent signature required when reinstating) Sypression betrakes transport to construed agreed and title it approximate DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELFTE Change TITLE 1.1 TITLE Addition RICKEL, ROBERT S. NAME 1.2 NAME -5701 N PINE ISLAND RD SUITE 390 2539 OfDURECTION BEACH, FL 33409 Change 1.3 STREET ADDRESS STREET ADDRESS **FAMARAC FL-**CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE Addition TITLE 2.1 T(T) E **SELDORIDGE, RICHARD** NAME **\$701 N PINE ISLAND RD SUITE 30**0 STREET ADDRESS MMARAC FL-2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIF CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change 5.1 TITLE Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME

14. Thereby certify that the information supplied with this fling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, if further certify that the information indicated on this annual report or supplied ental appear 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 corporator for the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changing or given state friend with an address

6.3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Mode (renuna