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 # J98119

(

FILED
May 04 1998 8:00am
Secretary of State

CARY	CONSTRUCTION CORP.						
Principal Plac		Mailing Address					i mimin mintt mibli himil saltı
7 BARRACUI KEY LARGO		100 ANCHOR DR #478					
US	KEY LARGO FL 33037				DO NOT WRITE IN THIS	SPACE	
		US				3. Date Incorporated or Qualified	
						10/14/1987	
 -	lace of Business	2a. Mailing Address				4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0018453	Not Applicable		
22			27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	ө	City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	· · · · · · · · · · · · · · · · · · ·			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	\vdash	intry		8. This corporation owes or has paid the cur	
24	25 9. Name and Address of Cui	rent Begistered Agent	30			Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
CA	VRY, MIKELL A.			81	Name	(U. Mario and Addiess of few Hogisteless	- Bour
	R. C. BOX 478			82	Ctan at A d	described by the best to the territory	<u> </u>
KE	Y LARGO FL 33037			02	Street Add	dress (P.O. Box Number is Not Acceptable)	
				83			
				84	City		85 Zip Code
44 Durament	to the provisions of Continue CO7 (0000 and 007 4000 ftee 2- 00-1	46			FL	
office or r	egistered agent, or both, in the St	ate of Florida. Such change was	authorize	d by	-named cor the corpora	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the app	changing its registered ointment as registered
	m tamiliar with, and accept the or	oligations of, Section 607.0505, Fi	orida Stat	utes	-		
SIGNATURE	Signature, typed or printed name of registered	lagent and tille it applicable (NO	E Registered	d Ager	nt signature requ	Lired when reinstating) DATE	
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	PO Cary, Mikell A.	☐ DELETE	1.9 TII				Change Addition
NAME CIRCET ADDRESS	14A BARRACUDA LN		1.2 NA				
STREET ADDRESS CITY-ST-ZIP	KEY LARGO FL				ADDRESS		
TITLE	1127 2 110 110 110	1/3		1.4 CITY-ST-ZIP 2.1 TITLE			Change Addition
NAME		bound Section	22 NAME				bridings reduition
STREET ADDRESS			1		ADDRESS		
CITY-ST-ZIP			2.4 C	ITY-SI	r-ZIP		
TITLE		DELETE	3.1 TIT	TLE			☐ Change ☐ Addition
NAME			3.2 NA	ME			
STREET ADDRESS			3.3 ST	REET A	ADDRESS		
CITY-ST-ZIP		Driver	3.4. CI		I - ZIP		
TITLE		☐ DELETE	4.1 10				Change Addition
NAME OTDEET ADDDESS	*.		4.2 N		DDDCCC		
STREET ADDRESS CITY-ST-ZIP	•		4.4 CI		ADDRESS		
TITLE		☐ DELETE	5.1 7()		- 215		Change Addition
NAME		_	5.2 NAME				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			5.4 CI	TY-ST	- ZIP		
TITLE		☐ DELETE	61 TIT	TLE			☐ Change ☐ Addition
NAME			6.2 NA	ME			
STREET ADDRESS			6.3 ST	REET A	ODRESS		
CITY-ST-ZIP			6.4 C(1	TY-ST	- ZIP		

4. 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 of true 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 attack near that it is a state of the corporation of the receiver of

ATURE.