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

PROFIT CORPORATION ANNUAL REPORT 1998 **DOCUMENT #**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

K97905

(0)

FILED Apr 23 1998 8:00am Secretary of State

RAYAN Principal Place	OONSTRUCTION, INC.	Mailing Address			
10940 SR 52		10940 SR 52			
-41047-SR-52		-11017 CR 52		DO NOT WRITE IN TH	HIS SPACE
HUDSON FL 34889 HUDSON FL 34669 US US				3. Date Incorporated or Qualified	10 01 102
				06/20/1988	
	Place of Business	2a. Mailing Address	- 0	4. FEI Number	Applied For
21 1094	to SR 52	26 10940 5	SR 52	59-2961476	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State	on TI	6. Election Campaign Financing	\$5.00 May Be
	ason H	28 Huds		Trust Fund Contribution	Added to Fees
コ ^{Zip} スル	Courter	Zip 3/11 /.Qi	Country 30 USA	8. This corporation owes or has paid the	-
24 24	25 Name and Address of Curre		30 USA	Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No
P/	OYD, ANNE		81 Name	the section with the section of the	
10	940 SR 52 IDSON FL 34669		82 Street Adds	ress (P.O. Box Number is Not Acceptable)	
			84 City		85 Zip Code
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the Sta m familiar with, and accept the obli-	gations of, Section 607.0505, Flor	is, the above-named corp uthorized by the corporal rida Statutes. Registered Agent signature requi	poration submits this statement for the purposition's board of directors. I hereby accept the	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	BOYD, ANNE		1.2 NAME		, ,
STREET ADDRESS	10940 SR 52		1.3 STREET ADDRESS		
CITY-ST-ZIP	HUDSON FL		1.4 CITY-ST-ZIP	·	34669
TITLE		DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			22 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	***	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP		Change Addition
TITLE			4.1 TITLE		Thought Then the
NAME OTDEET ADDRESS			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		ternal war and	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME		_	6.2 NAME		- —
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	and the the information or malied	with this filing does not qualify to		Section 119.07(3)(i), Florida Statutes, I furthe	s portification the information

or indicated on this annual report or supplied with this ming does not qualify for the exemption stated in Section 119.07(37), Florida Statutes. Fluring 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 attachment with an address.