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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

FILED Apr 14, 1999 8:00 am Secretary of State **Katherine Harris** Secretary of State

04-14-1999 90198 011 ***150.00

1, Corporation	MENT # L19021 RY CONSTRUCTION INC.					
Principal Place	e of Business	Mailing Address	-			01%
309 NE 38 ST	•	777 E ATLANTIC AVE			·	
BOCA RATON FL 33431 Z 7303				DO NOT WRITE IN THIS SPACE		
US		DELRAY BCH FL 33483 US			3. Date Incorporated or Qualifed	<u> </u>
1		00			09/26/1989	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 26					65-0144088	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 Additional
22	<u></u>	27 Z · 303	1		5. Cartificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23	28			,	Trust Fund Contribution	Added to Fees
Zip			Country	Intry 8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No		
24	9. Name and Address of Current		10		10. Name and Address of New Registered	
	3. Hame and reduces of control	t traffiction vigorit	81	Name		
BADER, GREGORY				Ot A 4 4 4	(D.O. Day My havin Not Apportable)	
309 NE 38 ST			82	Street Addi	ress (P.O. Box Number is Not Acceptable)	
BOC	A RATON FL 33431		83			
,		,	104	Oit.	S CONTRACTOR OF THE STATE OF TH	85 Zip Code 1
	•		84	City	一一一可以为《記》的AMFE	2 P COOP
office or re agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat				poration submits this statement for the purpose of on's board of directors. I hereby accept the appoin	changing its registered trment as registered
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: Re	egistered Age	nt signature require	ed when reinstating) DATE	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D .	. DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	BADER, GREGORY		1.2 NAME]		
STREET ADDRESS	309 NE 38 ST			TADDRESS	. •	
CITY-ST-ZIP	BOCA RATON FL 33431	☐ DELETE	1.4 CITY-S	T-ŽiP		Change Addition
TITLE		□ DELETE	2.1 TITLE 2.2 NAME		•	
NAME			1	TADDRESS		
STREET ADDRESS	· · · ·		2.3 STREE	1		4 * * .
CITY-ST-ZIP		☐ DELETE	3.1 TITLE	Q1 6.01		Change Addition
NAME		_	3.2 NAME			
STREET ADDRESS			F .	TADDRESS		
CITY-ST-ZIP	•		3.4. CITY-1			
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	TADDRESS		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME	- 1	:	
STREET ADDRESS				T ADDRESS	,	
CITY-ST-ZIP	<u> </u>	☐ DELETE	5.4 CITY-S 6.1 TITLE	SI-ZIP		☐ Change ☐ Addition
TITLE		· DELETE	6.2 NAME			□ outrige □ Auditori
NAME	,			T ADDRESS		
STREET ADDRESS			6.4 CITY-S			
CITY-ST-ZIP	l .		0.4 (4) 11-2	<u>-</u> .		

14. 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 attachment with an address, with all other like empowered.

SIGNATURE:

4-13-99

561.750 - 2272