FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation Name

DOCUMENT #

L33791

(9)

	CONSTRUCTION CORP	ORATION	····		.,			
Principal Place of Business Mailing Address							ar eint Albii Albii Bib	ir debit glatt blått ibbt
450 46TH (VERO BEAC	COURT Ch FL 32968	450 46TH COURT VERO BEACH FL 32	450 46TH COURT VERO BEACH FL 32968					
						3. Date Incorporated or Qualified 11/30/1989	3a. Date of Lat 06/14	st Report 1/1995
Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For
21	0 -4	26				65-0216850 Not Applicable		
Suite, Apt. #		Suite, Apt. #, etc.	7			5. Certificate of Status Desired		.75 Additional ee Required
City & State	ı		City & State			6. Election Campaign Financing	□ \$5	5.00 May Be
Zip	Country	28 Zio	Zip Country			Added to Fees		
24	25 29		Country 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No		
g. Name and Address of Curre		ent Registered Agent				10. Name and Address of New Registered Agent		
				Nam	ie		-giotorou Agoin	
JULIN,	PAUL N.			22 04		(DO Parklanta in No.		
	TH COURT		82 Street Add		et Adores	s (P.O. Box Number is Not Acceptable	e)	
VERO BEACH FL 32968				83				
			ļ. <u>.</u>	34 City				
			1	"			FL 85	Zip Code
11. Pursuant to or registere familiar with	o the provisions of Sections 607.05 ad agent, or both, in the State of Fic h, and accept the obligations of, Se	02 and 607.1508, Florida Statut orida. Such change was authoriz oction 607.0505, Florida Statutes	es, the above ed by the co s.	e-narned rporation	corporati 's board	on submits this statement for the purp of directors. I hereby accept the appo	oose of changing intraent as registe	its registered office cred agent. I am
SIGNATURE _								
12.	Signature, typed or printed name of registered ag	ent and lifts if an fisable (NC	DTE: Registered A	gent signatu	re required wi		DATE	
TITLE	PT	DELETE	13.	1. 1 TITLE		ADDITIONS/CHANGES TO OFFIC	CERS AND DIREC	
NAME	JULIN, PAUL N.		1.2 NA				C Guan	ge 🔲 Addition
STREET ADDRESS	ATA AATI AANAT			13 STREET ADDRESS				
CITY-ST-ZIP	VERO BEACH FL		14 CITY-		<u> </u>			
TITLE	VPS	DELETE		2 1 TITLE			☐ Chan	ge
NAME	JULIN, BONNIE		2.2 NAM	lE.		- congression		,
STREET ADDRESS	450 46TH COURT		2.3 STREET A		s			
CITY-ST-ZIP	VERO BEACH FL		2 4 CITY	- ST - ZIP				
TITLE		DELETE	3. 1 TiTL	£			☐ Chan	ge Addition
NAME			3.2 NAM	E				
STREET ADDRESS			33 SIR	EET ADORES	s			-
CITY-ST-ZIP			3.4 CITY	-\$1-ZIP				
TITLE		DELETE	4. 1 TITL				☐ Chan	ge 🔲 Addition
NAME			4.2 NAM					
STREET ADDRESS				ET ADDRES	S			
CITY-ST-ZIP TITLE		□ herete		4 4 Chiy - ST - ZIP				
NAME		DELETE	ı	5 1 TITLE			Chan	ge 🔲 Addition
STREET ADDRESS			5 2 NAM					ļ
CITY-ST-ZIP				ET ADDRES				
TITLE		DELETE		5.4 C+TY - ST - Z+P 6 1 TITLE			[] Chan	ns D Addition
NAME		Ц	6.2 NAM				FTI Cuani	ge Addition
STREET ADDRESS				et addres:				
CITY-ST-ZIP			6.4 City					
	certify that the information supplied	d with this filing is voluntarily furn	ished and do	es not q	ualify for t	he exemption stated in Section 119.0	7(3)(k), Florida Sta	atutes. 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 Bl SIGNATURE: JOHN PED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

MAY 9 1996 407 567-7250