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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPÓRATIONS

DOCUMENT # L52724

(6)

FX CONSTRUCTION, INC.

FILED
May 06 1997 8:00am
Secretary of State

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Principal Plac	Principal Place of Business Mailing Address		E (ABOLIAN) ABOL BIŞIR (1811) IBBEĞ (1811 9181)		(I BABIA BABA	DIDII SUDI			
C/O DÁVID L. NEDERVELD 5301 GREAT OAK DRIVE LAKELAND FL 33801		5301 GREAT O	C/O DAVID L. NEDERVELD \$301 GREAT OAK DRIVE LAKELAND FL 33815-3113						
						3. Date Incorporated or Qualified 02/22/1990		e of Last f 1/1996	Report
— '	Place of Business	2a. Mailing Ad	ddress	,		4. FEI Number		A	pplied For
Suite, Apt.	# oto	26 Suite, Apt.	# ata			59-3007960			ot Applicable
22	. #, O(C.	27 Suite, Apr.	. #, etc.			5. Certificate of Status Desired	XX		Additional equired
City & Stat	te	City & Stat	le			6. Election Campaign Financing		····	<u> </u>
23		28				Trust Fund Contribution			May Be to Fees
Žip	Country	Zip		Country	/	8. This corporation has liability for i			
24	25	29	30]				No	
	9. Name and Address of Cu	rrent Registered Agen	nt			10. Name and Address of New Re	gistered A	gent	
	KELVEY, JOHN L			81	Name				
	1 Great oak drive Eland FL 33801			62	Street Ac	ldress (P.O. Box Number is Not Acceptab	lo)		
				83					
				84	City			85 Zip	Code
					/		۴L	1 .	
office or a agent. I a SIGNATURE	registered agont, or both, in the sam familiar with, and accept the o	tate of Florida. Such ch bligations of, Section 60	nange was auti 07.0505, Florid	iorižed bi a Statute	y the corpo s.	orporation submits this statement for the p ration's board of directors. I hereby accep	t the appo	intment as	registered
12.	Signature, typed or printed name of registere	d agent and title it applicable AND DIRLCTORS	(NOTE: Ba	egistéred Agr	ent signature rec	quired when reinstating)	DATE	DIDECTO	20 11 40
TITLE	D		DELETE	1.1 TOLE		ADDITIONS/CHANGES TO OFFIC		DIRECTOR Change	RS IN 12 Addition
NAME	MCKELVEY, JOHN	L	DELETE	1.2 NAME	ĺ		L		f"1 Wooltion
STREET ADDRESS	5301 GREAT OAK DRIVE			1.3 STREET	ANDRESS				
CITY-ST-ZIP	LAKELAND FL			1.4 CITY - 5					
TITLE			DELETE	2.1 TITLE	11-511			Change	Addition
NAME				2.2 NAME					
STREET ADDRESS				23 STREET	ADDRESS				
CITY-ST-ZIP			,	2 4 City-					
TITLE			DELETE	31 TITLE			1	Change	Addition
NAME				3.2 NAME				-	
STREET ADDRESS				3.3 \$1REE1	ADDRESS				
CITY-ST-ZIP				3.4, CITY -	S1 - ZIP				
TITLE			DELETE	4.1 THIE				Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 _, C(1)Y - S	1-ZIP				
TITLE			DETETE	5.1 TITLE				Change	[_] Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET	1				
CITY-ST-ZIP			DELETE	5.4 CITY - S	1-2IP				
TITLE			DITELE	G.1 TITLE				Change	Addition
NAME				6.2 NAME		•			
STREET ADDRESS				6.3,STRELT	ADDRESS				
CITY-ST-ZIP	by cartify that the information curv	and a control of the second	- 126	64 CHY-S	1 - ZIF				

I do nereuy certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutos. 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.

OLONIATURE

Ομβρήη McKelvey, Presi

04-28-97 941-687-4567