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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

SIGNATURE:

DOCUMENT # L65208

(5)

## R & D CONSTRUCTION MANAGEMENT CORPORATION

Puncinal Place	e of Business	Mailing Address	<del> </del>				
Principal Place of Business Mailing Address P.O. BOX 013525 P.O. BOX 013525 MIAMI FL 33101 MIAMI FL 33101 MIAMI FL 33101							
					Date Incorporated or Qualified     04/13/1990	\$a. Date of Last Report 05/01/1996	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3013597	Not Applicable  \$8.75 Additional		
22 Suite, Apr.	#, etc.	27			5. Certificate of Status Desired	Fee Required	
City & State	e e	City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Ζιρ	Countr	у	8. This corporation has liability for	ntangible tax under s. 199.032,	
24	25	29	30			Yes No	
	9. Name and Address of Curren	t Registered Agent		1	10. Name and Address of New Re	gistered Agent	
	PRKMAN, PAMELA		8	Name			
	9 SPANISH LACE LN.		82 Street Address (P.O.		ddress (P.O. Box Number is Not Acceptat	ile)	
VEN	O BEACH FL 32963		8:	<del> </del>			
			_				
			8-	1		FL 85 Zip Code	
11. Pursuant office or r agent. La SIGNATURE	to the provisions of Sections 607,050 egistered agont, or both, in the State in familiar with, and accept the obligations.	2 and 607.1508, Florida Statu of Florida. Such change was ations of, Section 607.0505, F	ites, the abo authorized t lorida Statuti	ve-hamed only by the corposes.	orporation submits this statement for the poration's board of directors. I hereby accept	urpose of changing its registered of the appointment as registered	
SIGNATURE	Signature, typico or printed name of registered age	nt and title if applicable. (NO	TE: Registered A	ent signature n	equired when reinstating)	DATE	
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFIC		
TITE	0	☐ DELETE	1.1 TITLE	1		Change Addition	
NAME	BJORKMAN, R.L.		1.2 NAME				
STREET ADDRESS	1159 SPANISH LACE LN VERO BEACH FL		1	T ADORESS			
City-St-7iP	D DEADNIL	DELETÉ	1.4 CITY- 2.1 TITLE			☐ Change ☐ Addition	
TITLE NAME	BJORKMAN, PAMELA	La beceive	2.7 TITLE 2.2 NAME	- 1			
STREET ADDRESS	1159 SPANISH LACE LN.			T ADDRESS			
CITY-ST-ZIP	VERO BCH FL		2.4 City				
TITLE		DELETE	3.1 TITLE			Change Addition	
NAME .			3.2 NAME				
STREET ADDRESS			3.3 STRE	T ADDRESS			
CITY - ST - ZIP			3.4. CITY	- ST - ZIP			
TITLE		☐ DELETE	4.1 THTLE			Change Addition	
NAME			4. 2 NAM	E			
STREET ADDRESS			4.3 STRE	T ADDRESS			
CHY-ST-7IP		DELETE	4.4 CITY-			Change Addition	
1ITLF		F" refere	5.1 TITLE			Change ( Abdition	
NAME STUDE E RESERVE C			5.2 NAME	T AODRESS			
STREET ADDRESS I			5.4 CITY				
CITY - ST - 7iP		DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			•	T ADDRESS			
CITY - S1 - ZIP			6.4 CITY				
<b>14.</b> 1 do horel	by certify that the information supplied	d with this filing does not qua	lify for the ex	emption sta	ited in Section 119.07(3)(i), Florida Statute	s. I further certify that the	
informatic Lam an o appears i	are indicated on trils annual report or sofficer or director of the corporation or in Block 12 or Block 13 if changed, or	supplemental annual report is the receiver or trustee empor ron an attachment with an ac	uue and ac wered to exe idress.	cute this re	hat my signature shall have the same lega port as required by Chapter 607, Florida S	is enect as it made under dain; that talutes; and that my name	