COR ANNL	NOW: FILIN PROFIT RPORATION JAL REPORT 1999	G FEE AFTER		TMENT OF STATE e Harris of State	FILI Mar 04, 19 Secretary 03-04-1999 90159	99 8:00 of Sta	te
		65654					
A. C. CC	DNSTRUCTION, I	NC.					
rincipal Place	e of Business	Mail	ing Address		\	1911 91911 91911 91911 91	
1121 W. NORTH A ST. 4121 W NORTH TAMPA FL 33609 TAMPA FL 3360							
S		US			DO NOT WRITE IN 1 3. Date Incorporated or Qualifed	THIS SPACE]
					04/13/1990		Kad Ean
1. Principal Pl	Ace of Business	$A_{V c} \begin{bmatrix} 2a. \\ 2b \end{bmatrix}$	Vailing Address 305 N	Lois Ave	4. FEI Number 59-3007644	Luck - · ·	lied For Applicable
Suite, Apt.			Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Ac Fee Reg	I
City & State	e		City & State		6. Election Campaign Financing	\$5.00 N	
Zip		28	lampa	Country	Trust Fund Contribution 8. This corporation owes the current year	Added to	Fees
336	UG 25 4	5 29	3360g [30 US	Personal Property Tax.	Ves []No
·	9. Name and Addr	ress of Current Registe	ered Agent	81 Name	10. Name and Address of New Registe	red Agent	
	TELLANO, ANDREA				Idress (P.O. Box Number is Not Acceptable)		
	I W NORTH A ST IPA FL 33609			83	5 N Lois Ave	•	
						85 Zip C	ode i
1. Pursuant	to the provisions of Se	ctions 607.0502 and 607	7.1508, Florida Statute	84 City s, the above-named co	reportion submits this statement for the purpos	FL 334	
office or re agent. I a SIGNATURE	egistered agent, or both im familiar with, and acc Signature, typed or printed nam	h, in the State of Florida cept the obligations of, 5 me of registered agent and title if a	applicable. (NOTE: 1	s, the above-named co thorized by the corpora da Statutes.	uired when reinstating)	FL 334	egistered istered
office or re agent. I a	egistered agent, or both im familiar with, and acc Signature, typed or printed nam	h, in the State of Florida cept the obligations of, 5	applicable. (NOTE: 1	s, the above-named co thorized by the corpora da Statutes.	orporation submits this statement for the purpos ation's board of directors. I hereby accept the a	FL 334	egistered istered
office or re agent. I a IGNATURE 2.	egistered agent, or both m familiar with, and acc Signature, typed or printed nan D CASTELLANO, AN	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	I. Such change was au Section 607.0505, Flori applicable. (NOTE: TORS	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature requ 13. 1.1 TITLE 1.2 NAME	uired when reinstating) DAT ADDITIONS/CHANGES TO OFFICER	FL 332 e of changing its r ppointment as reg S AND DIRECTOR Change	egistered istered
office or r agent. I ar SIGNATURE 2. TLE AME IREET ADDRESS	egistered agent, or bott m familiar with, and acc Signature, typed or printed nan D CASTELLANO, AN 4121 W NORTH A	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	I. Such change was au Section 607.0505, Flori applicable. (NOTE: TORS	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICER	FL 332	egistered istered
office or re agent. I ar SIGNATURE 2. TLE AME	egistered agent, or both m familiar with, and acc Signature, typed or printed nan D CASTELLANO, AN	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	I. Such change was au Section 607.0505, Flori applicable. (NOTE: TORS	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature requ 13. 1.1 TITLE 1.2 NAME	uired when reinstating) DAT ADDITIONS/CHANGES TO OFFICER	FL 332 e of changing its r ppointment as reg S AND DIRECTOR Change	egistered istered
office or r agent. I a SIGNATURE 2. TLE AME IREET ADDRESS TY-ST-ZIP TLE	egistered agent, or bott m familiar with, and acc Signature, typed or printed nan D CASTELLANO, AN 4121 W NORTH A	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	. Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE	s, the above-named oc thorized by the corpora da Statutes. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ADDITIONS/CHANGES TO OFFICER	FL 332 e of changing its r ppointment as reg S AND DIRECTOR Change	egistered istered RS IN 12
office or r agent. I a SIGNATURE 2. TLE AME TY-ST-ZIP TLE AME TREET ADDRESS	egistered agent, or bott m familiar with, and acc Signature, typed or printed nan D CASTELLANO, AN 4121 W NORTH A	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	. Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE	s, the above-named oc thorized by the corpora da Statutes. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICER	FL 332 e of changing its r ppointment as reg S AND DIRECTOR Change	egistered istered RS IN 12
office or r agent. I a siGNATURE 2. TLE MME TY-ST-ZIP TLE MME IREET ADDRESS TY-ST-ZIP	egistered agent, or bott m familiar with, and acc Signature, typed or printed nan D CASTELLANO, AN 4121 W NORTH A	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	. Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE	s, the above-named oc thorized by the corpora da Statutes. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ADDITIONS/CHANGES TO OFFICER	FL 332 e of changing its r ppointment as reg S AND DIRECTOR Change	egistered istered RS IN 12
office or r agent. I a SIGNATURE 2. TLE AME TREET ADDRESS TY-ST-ZIP TLE REET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS	egistered agent, or bott m familiar with, and acc Signature, typed or printed nem CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	. Such change was au Section 607.0505, Flori	s, the above-named of thorized by the corpora da Statutes. Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ADDITIONS/CHANGES TO OFFICER	FL 332	egistered istered 3\$ IN 12 Addition
office or r agent. I a SIGNATURE 2. TLE TLE TREET ADDRESS TY- ST- ZIP TLE AME TREET ADDRESS TY- ST- ZIP TLE AME TREET ADDRESS	egistered agent, or bott m familiar with, and acc Signature, typed or printed nem CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	. Such change was au Section 607.0505, Flori	s, the above-named of thorized by the corpora da Statutes. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADORESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ADDITIONS/CHANGES TO OFFICER	FL 332	egistered istered 3\$ IN 12 Addition
SIGNATURE SIGNATURE 2. TLE AME TREET ADDRESS TY- ST- ZIP TLE AME TREET ADDRESS TY- ST- ZIP TLE AME TREET ADDRESS TY- ST- ZIP	egistered agent, or bott m familiar with, and acc Signature, typed or printed nem CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	. Such change was au Section 607.0505, Flori	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADORESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE	ADDITIONS/CHANGES TO OFFICER	FL 332	egistered istered 3\$ IN 12 Addition
office or r agent. I a agent. I a GIGNATURE 2. TLE MME TREET ADDRESS TY-ST-ZIP TLE MME TREET ADDRESS TY-ST-ZIP TLE MME TREET ADDRESS TY-ST-ZIP TLE AME	egistered agent, or bott m familiar with, and act Signature, typed or printed nam CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE DELETE DELETE DELETE	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	ADDITIONS/CHANGES TO OFFICER	FL 332	egistered istered RS IN 12 Addition
Affice or r agent. I a agent. I a agent. I a agent. I a agent. I a agent. I a rect address TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE	egistered agent, or bott m familiar with, and act Signature, typed or printed nam CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE DELETE DELETE DELETE	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICER	FL 332	egistered istered RS IN 12 Addition Addition
Affice or r agent. I a agent. I a agent. I a agent. I a agent. I a agent. I a rect address TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP	egistered agent, or bott m familiar with, and act Signature, typed or printed nam CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE DELETE DELETE DELETE	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	ADDITIONS/CHANGES TO OFFICER	FL 332	egistered istered RS IN 12 Addition Addition
AGRICE OF IT AGRIT L AN AGRIT L A	egistered agent, or bott m familiar with, and act Stgnature, typed or primed nem CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE DELETE DELETE DELETE DELETE	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	ADDITIONS/CHANGES TO OFFICER	FL 332	egistered istered RS IN 12 Addition
office or r agent. I a aligNATURE 2. TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE TREET ADDRESS TY-ST-ZIP TLE WE RREET ADDRESS TY-ST-ZIP TLE WE RREET ADDRESS	egistered agent, or bott m familiar with, and act Stgnature, typed or primed nem CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE DELETE DELETE DELETE DELETE	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	ADDITIONS/CHANGES TO OFFICER	FL 332	egistered istered RS IN 12 Addition
office or r agent. I a GIGNATURE 2. TLE MME TREET ADDRESS TY-ST-ZIP TLE MME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP	egistered agent, or bott m familiar with, and act Stgnature, typed or primed nem CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE DELETE DELETE DELETE DELETE	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ADDITIONS/CHANGES TO OFFICER	FL 332	egistered istered RS IN 12 Addition
office or r agent. I a gont. I a gont. I a signature TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME	egistered agent, or bott m familiar with, and act Signature, typed or printed nem CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	Such change was au Section 607.0505, Flori TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	ADDITIONS/CHANGES TO OFFICER	FL	egistered istered RS IN 12 Addition Addition
office or r agent. I a SIGNATURE 2. TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP	egistered agent, or bott m familiar with, and act Signature, typed or printed nem CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC	Such change was au Section 607.0505, Flori TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ADDITIONS/CHANGES TO OFFICER	FL	egistered istered RS IN 12 Addition
office or r agent. 1 a IGNATURE 2. 7LE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP	egistered agent, or bott m familiar with, and act Signature, typed or primed nem CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and life if a OFFICERS AND DIREC IDREA A ST	Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE	s, the above-named of thorized by the corpora da Statutes. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADORESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 STREET ADDRESS 5.4 CITY-ST-ZIP 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP	apporation Submits this statement for the purpos ation's board of directors. I hereby accept the a ured when reinstating) DAT ADDITIONS/CHANGES TO OFFICER 305 N LOIS AVE Tampa FL 33	FL 332 ie of changing its r ppointment as reg is AND DIRECTOF is change is AND DIRECTOF is change is Change is change	egistered istered RS IN 12 Addition Addition Addition Addition Addition
office or r agent. I a lGNATURE 2. LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	egistered agent, or bott m familiar with, and act Signature, typed or primed nem CASTELLANO, AN 4121 W NORTH A TAMPA FL	h, in the State of Florida cept the obligations of, S ne of registered agent and life if a OFFICERS AND DIREC IDREA A ST	Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE	s, the above-named of thorized by the corpora da Statutes. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADORESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 STREET ADDRESS 5.4 CITY-ST-ZIP 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP	apporation submits this statement for the purpos ation's board of directors. I hereby accept the a uired when reinstating) DAT ADDITIONS/CHANGES TO OFFICER 305 N LOIS AVE Tampa FL 33	FL 332 ie of changing its r ppointment as reg is AND DIRECTOF is change is AND DIRECTOF is change is Change is change	egistered istered RS IN 12 Addition Addition Addition Addition Addition