

3-25-97 B C
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L75868 (4)			
1. Corporation Name BLAZER CONSTRUCTION INDUSTRIES, INC.			
Principal Place of Business 407 COMMERCE WAY STE 1A JUPITER FL 33458 US		Mailing Address 407 COMMERCE WAY STE 1A STE 1A JUPITER FL 33458-9876 US	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip		28 Zip	
24 Country		29 Country	
25		30	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GOK, JACK S 4114 NORTHLAKE BLVD STE 901 PALM BEACH Gdns FL		81 Name Larry E. Emig 82 Street Address (P.O. Box Number is not acceptable) 2701 SW Ann Arbor Rd. 83 Pt. St. Lucie 84 City FL 85 Zip Code 34983	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE Robert K. Verma		DATE 4/13/97	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DTS		1.1 TITLE	
NAME HUGHES, TODD A.		1.2 NAME	
STREET ADDRESS 407 COMMERCE WAY, #2A		1.3 STREET ADDRESS	
CITY- ST- ZIP JUPITER FL		1.4 CITY- ST- ZIP	
TITLE PD		2.1 TITLE	
NAME VERMURLEN, ROBERT R.		2.2 NAME	
STREET ADDRESS 407 COMMERCE WAY #2A		2.3 STREET ADDRESS	
CITY- ST- ZIP JUPITER FL		2.4 CITY- ST- ZIP	
TITLE DVP		3.1 TITLE	
NAME EMIG, LARRY E.		3.2 NAME	
STREET ADDRESS 407 COMMERCE WAY #2A		3.3 STREET ADDRESS	
CITY- ST- ZIP JUPITER FL		3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	
14. I do 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.			
SIGNATURE: Robert K. Verma		3-20-97	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

CR2E034 (9/96)