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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L75868

(4)

BLAZER CONSTRUCTION INDUSTRIES, INC.

## FILED Apr 14 1998 8:00am Secretary of State

| Principal Plac                  | e of Business  | Mailing Address               |                       |   |                                   | -  | IEII UTOII EIBII EIBI | (F 0101) (O E)        |
|---------------------------------|--|-------------------------------|-----------------------|---|-----------------------------------|--|-----------------------|-----------------------|
| 407 COMMERCE WAY                |  | 407 COMMERCE WAY STE 1A       |                       |   |                                   |  |                       |                       |
| STE 1A                          |  | STE 1A                        |                       |   | DO NOT WRITE IN THIS SPACE        |  |                       |                       |
| JUPITER FL 33458<br>US          |  | JUPITER FL 33458<br>US        |                       |   | 3. Date Incorporated or Qualified |  |                       |                       |
| 05                              |  | •                             |                       |   |                                   | 05/25/1990   |                       |                       |
| 2. Principal P                  | lace of Business   | 2a. Mailing Address           |                       |   |                                   | 4. FEI Number  | Ar                    | pplied For            |
| 21                              |  | 26                            |                       |   |                                   | 65-0194488   |                       | ot Applicable         |
| Suite, Apt. #, etc.             |  | Suite, Apt. #, etc.           |                       |   |                                   | 5. Certificate of Status Desired                       |                       | Additional<br>equired |
| City & State                    |  | City & State                  |                       |   |                                   |  |                       |                       |
| 23 City & Stat                  | e  | 28)                           |                       |   |                                   | 6. Election Campaign Financing Trust Fund Contribution |                       | May Be<br>to Fees     |
| Zip                             | Country  | 7 <sub>(p)</sub>              | Count                 | ry  |                                   | 8. This corporation owes or has paid the               |                       |                       |
| 24                              | 25   |                               | 30                    | 10  |                                   | Personal Property Tax due June 30. 🔀 Yes 🔲 No          |                       |                       |
|                                 | 9. Name and Address of Curren  | t Registered Agent            |                       |   |                                   | 10. Name and Address of New Registere                  | d Agent               |                       |
| EM                              | IIG, LARRY E   |                               | 8                     | 1 Na  | ne                                |  |                       |                       |
| 2701 <b>\$</b> W ANN ARBOR ROAD |  |                               | 8                     | 82 Street Address (P.O. Box Number is Not Acceptable) |                                   |  |                       |                       |
| P0                              | RT ST LUCIE FL 34983   |                               | 8                     | -   |                                   |  |                       |                       |
|                                 |  |                               | ١                     | 1   |                                   |  |                       |                       |
|                                 |  |                               | 8                     | 4 Cit   | /                                 |  | <b>85</b> Zip         | Code                  |
| 11 Pursuani                     | to the provisions of Sections 607.050  | 2 and 607.1508. Florida Statu | tes, the abo          | . <b> </b><br>ve-nar                                  | ned corpo                         | oration submits this statement for the purpose         | of changing i         | its registered        |
| l office or r                   | registered agent, or both, in the State<br>im familiar with, and accept the obliga | of Florida, Such change was:  | authorized I          | ov the  | corporatio                        | on's board of directors. I hereby accept the a         | ppointment as         | registered            |
|                                 | an lammar with, and accept the ornige  | mons or, dection cor.coos, in | onda oktioi           |   |                                   |  |                       |                       |
| SIGNATURE                       | Signature, typed or printed name of registered ages                                | Land title if applicable (NO  | E: Registered A       | gent sign   | ature requirer                    | d when reinstating) DATE                               |                       |                       |
| 12.                             | OFFICERS AND   |                               | 13.                   |   |                                   | ADDITIONS/CHANGES TO OFFICERS A                        | ND DIRECTOR Change    | RS IN 12 Addition     |
| TETLE                           | DTS  | ☐ DELETE                      |                       | 1.1 TITLE   |                                   |  | □ Cuange              | Addition              |
| NAME                            | 11001100110011   |                               | 1.2 NAMI              |   | -00                               |  |                       |                       |
| STREET ADDRESS                  | ALIBERT OF   |                               |                       | ET ADDRI  | .55                               |  |                       |                       |
| CITY-ST-ZIP<br>TITLE            |  |                               | 1.4 CITY<br>2.1 TITLE |   |                                   |  | Change                | Addition              |
| NAME                            | _  |                               | 2.2 NAM               |   | 1                                 |  | _                     |                       |
| STREET ADDRESS                  | 407 COMMERCE WAY #2A   |                               | 2.3 STREET ADDRESS    |   | :ss                               |  |                       |                       |
| CITY-ST-ZIP                     | JUPITER FL   |                               | 2. 4 CITY - ST - ZIP  |   |                                   |  |                       |                       |
| TITLE                           | OVP  | DELETE                        | 3.1 1/116             |   |                                   |  | Change                | Addition              |
| NAME                            | EMIG, LARRY E.   |                               | 3.2 NAM               | E   |                                   |  |                       |                       |
| STREET ADDRESS                  | 407 COMMERCE WAY #2A   |                               | 1                     | e1 addri  |                                   |  |                       |                       |
| CITY-ST-ZIP                     | JUPITER FL   | ☐ DELETE                      |                       | - \$1 - ZIP   |                                   |  | Change                | Addition              |
| TITLE                           |  |                               | 4.1 TITLE<br>4. 2 NAM |   |                                   |  | C ounds               | recentor              |
| NAME<br>DAMEST ADDOLOG          |  |                               |                       | ic<br>Et addri  | rec                               |  |                       |                       |
| STREET ADDRESS<br>CITY-ST-ZIP   |  |                               | 4.4 CITY              |   | 55                                |  |                       |                       |
| TITLE                           |  | DELETE                        | 5.1 TITLE             |   |                                   |  | Change                | Addition              |
| NAME                            |  |                               | 5.2 NAM               | E   |                                   |  |                       |                       |
| STREET ADDRESS                  |  |                               | 5.3 STRE              | et addri  | :SS                               | ,  |                       |                       |
| CITY-ST-ZIP                     |  |                               | 5.4 CITY              | -ST-ZIP   |                                   |  |                       |                       |
| TITLE                           |  | DELETE                        | 6.1 TITLE             |   |                                   |  | Change                | ☐ Addition            |
| NAME                            |  |                               | 6.2 NAM               |   | ļ                                 |  |                       |                       |
| STREET ADDRESS                  |  |                               | 6.3 STRE              | et addr   | :SS                               |  |                       |                       |
| I AUTO AT THE                   |  |                               | 0.40037               | 07 7/0  | •                                 |  |                       |                       |

14. I 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 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 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 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 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 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 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 in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certificate in Section 119.07(3)(ii). Florida Statutes. I further certificate in Section 119.07(3)(ii). Florida Statutes.