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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22, 1999 8:00am

Secretary of State

01-22-1999 90040 015 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L75991

TURN KEY HOME BUILDERS, INC.

						<u> </u>		/ 	.
Principal Place of Business Mailing Address									
4840 ROYAL PALM BCH BLVD 6644 ROYAL PALM BCH B						· ·			
US PALM	BEACH FL 33411	169 SEAVIEW AVENUE ROYAL PAŁM BEACH FL 33411			DO NOT WRITE IN THIS SPACE				
US						3. Date incorporated or Qualifed			
						05/24/1990	·,		•
2. Principal Place of Business 2a. Mailing Address			•			4. FEI Number		T A	pplied For
21		26	6			65-0200205		1 1	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.					<u> </u>	Additional
22		27	27			5. Certificate of Status Desired	Ш	Fee R	equired
City & Stat	le	City & State	City & State			6. Election Campaign Financing S5.00 May Be			
23		28	28			Trust Fund Contribution			to Fees
Zip	Country	Zip	Соці	ntry	•	8. This corporation owes the current year Intangible			
24	25	29	30			Personal Property Tax.		Yes	□No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered /	Agent	
MVI	IDA ANTLIONIV			81	Name				. [
MYURA, ANTHONY				82 Street Address (P.O. Box Number is Not Acceptable)			e)		
4840 ROYAL PALM BCH BLVD					01/001/1001	the second secon	ery Transport	· · · · · · · · · · · · · · · · · · ·	
. HUT	'AL PALM BEACH FL 33411		[83				相關的	福福福
			-	84	City		my in S	12年15年16日 マスエド 安田	20 15 15
				04	City		FL	85 Zip	Code
11, Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the ab	ove-	named corpo	oration submits this statement for the pun's board of directors. I hereby accept t	rpose of	changing its	registered
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was a ations of, Section 607,0505, Flo	authorized orida Statu	by ti ites.	he corporatio	n's board of directors. I hereby accept t	he appoir	ıtment as re	gistered
SIGNATURE							·		
					signature required	when reinstating)	DATE	•	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AN	D DIRECTO	DRS IN 12
TITLE	Р	☐ DELETE	1.1 TITI	LE			:	Change	☐ Addition
NAME	Myura, anthony		1.2 NAJ	ME					Ī
STREET ADDRESS	4840 ROYAL PALM BCH BLV		1.3 STF	REETA	ADDRESS				
CITY-ST-ZIP	ROYAL PALM BEACH FL 334	<u> </u>	1.4 CIT	Y-ST-	ZIP	·		•	
TITLE	VPD	☐ DELETE	2.1 TIT	LE				. 🔲 Change	☐ Addition
NAME	MYURA, DOUGLAS		2.2 NA	ME					.
STREET ADDRESS	4840 ROYAL PALM BCH BLVI)	2.3 STF	REETA	ADDRESS	·			:
CITY-ST-ZIP	ROYAL PALM BEACH FL 334	I1	2. 4 CIT	TY-ST-	-ZIP		•		
TITLE	·ijajo alto	☐ DELETE	3.1 T#T	LE				☐ Change	☐ Addition
NAME			3.2 NA	ME					
STREET ADDRESS			3.3 STF	REETA	ADDRESS :			1 1 157. × 51	Autoria National
CITY-ST-ZIP	14		3.4. CIT	ΓY-ST-	ZIP				
TITLE		☐ DELETE	4.1 TITL	LE				☐ Change	Addition
NAME			4. 2 NA	ME					
STREET ADDRESS	•		4.3 STR	REETA	DORESS				
CITY-ST-ZIP	•		4.4 CIT	Y-ST-	7IP				1
TITLE		☐ DELETE	5.1 TITL					Change	Addition
NAME			5.2 NAM	ME					
STREET ADDRESS			5.3 STR	REETA	DDRESS			*	,
CITY-ST-ZIP			5.4 CITY	Y-ST-Z	ZIP				
TITLE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ DELETE	6.1 TITL	.E				Change	Addition
NAME	C. C. C.		6.2 NAM	ИΕ		·			_
STREET ADDRESS			6.3 STR	REETA	ODRESS	•			İ
	. 2		•		1				ļ

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 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 effective manual 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 effective manual 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 effect of the corporation of the corporat

SIGNATURE

Daytime Phone #