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

PROFIT CCRPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secreta y of State DIVISION OF CORPORATIONS

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90058 050 ***150.00

DOCUMENT # L82981

S&L CONSTRUCTION, INC.

Principal Place	of Rusiness	Mailing Address				1∥			JI IADA BADAI			
6220 CARLTON RD.		6220 CARLTON RD.										
JACKSONVILLE FL 32244		JACKSONVILLE FL 32244										
US		US				DO NOT WRITE IN THIS SPACE						
							corporated or Qu /1990	ualifed				
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Nu	nber				App i	ed For
21		26				59-30	14135				Not 4	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				E Codifor	ite of Status Des	eirod		•		ditional
22		27				5. Certifica	LE OI SIAIUS DES		<u> </u>	Fee	Requ	uired
City & State		City & State				6. Election	ı Campaign Fina	ancing				ay Be
23		28					und Contribution				ed to	Fees
Zip	Country	Zip ,	Country	У)	rporation owes t	he curre	nt year Ir		,-	744
24	25		30				al Property Tax.	Nam D	-1-4	Yes	:	No
	9. Name and Address of Curren	t Registered Agent	81	T Na		10. Name	and Address of	New K	egistered	Agent		
DD/\	WN, LAURA JEAN		0	l Na	nie							
	CARLTON ROAD		82	2 Str	eet Ac dr	ress (P.O. Box	Number is Not	Accepta	ble)			
	(SONVILLE FL 32244			. _								
JPCF	GONVILLE I'L GZZ44		83	' [Î
			84	Cit				_	F	85	Zip Co	de
				<u> </u>						<u> </u>	- 14	-intered
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State	्रि and 607.1508, Florida Statute ति Florida, Such change was अ	es, the abov uthorized by	/e-nar / the c	ned corp orporation	oration submi	s this statement lirectors. I hereb	y accept	t the apro	ir changing sintment a	gillsre sregs	stered
agent. I a	m familiar with, and accept the obliga	it ons of, Section 607.0505, Flor	rida Statute	S.	•							
SIGNATUF:E									DATE			<u> </u>
	Signature, typed or printed name of registered ager	- 		ent signa	ture req Hre	d when reinstating)	NS/CHANGES	TO OFF	DATE	ND DIREC	CTOR	S IN 12
12.	OFFICERS AN	II) DIRECTORS	13.	ent signa	ture req Hre		ONS/CHANGES	TO OFF		ND DIRE(S IN 12
12.	OFFICERS AN	- 	13. 11 TITLE		ture req are		DNS/CHANGES	TO OFF				
12. TITLE NAME	D BROWN, ROBERT STEVEN	II) DIRECTORS	13. 11 TITLE 1.2 NAME				NS/CHANGES	TO OFF				
12. TITLE NAME STREET ADDRESS	D BROWN, ROBERT STEVEN 6220 CARLTON RD.	II) DIRECTORS	13. 11 TITLE 1.2 NAME 1.3 STREE	ET ADDF			ONS/CHANGES	TO OFF				
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244	I) DIRECTORS	13. 11 TITLE 1.2 NAME 1.3 STREE 14 CITY-5	ET ADDF			DNS/CHANGES	TO OFF			nge	
12. TITLE NAME STREET ADDR! SS CITY- ST-ZIP TITLE	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D	II) DIRECTORS	13. 11 TITLE 1.2 NAME 1.3 STREE 14 CITY-1 2.1 TITLE	ET ADDR)NS/CHANGES	TO OFF		☐ Char	nge	☐ Addition
12. TITLE NAME STREET ADDR: SS CITY- ST-ZIP TITLE NAME	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN	I) DIRECTORS	13. 11 TITLE 1.2 NAME 1.3 STREE 14 CITY-1 2.1 TITLE 2.2 NAME	ET ADDR	ESS)NS/CHANGES	TO OFF		☐ Char	nge	☐ Addition
12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD.	I) DIRECTORS	13. 11 TITLE 1.2 NAME 1.3 STREE 14 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE	ET ADDR ST-ZIP ET ADDR	ESS)NS/CHANGES	TO OFF		☐ Char	nge	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN	DIRECTORS DELETE DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 14 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-	ET ADDR ST-ZIP ET ADDR	ESS		ONS/CHANGES	TO OFF		☐ Char	nge	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD.	I) DIRECTORS	13. 11 TITLE 1.2 NAME 1.3 STREE 14 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-1 3.1 TITLE	ET ADDR	ESS		ONS/CHANGES	TO OFF		☐ Char	nge	Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD.	DIRECTORS DELETE DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	ET ADDR	ESS		ONS/CHANGES	TO OFF		☐ Char	nge	Addition
12. TITLE NAME STREET ADDRI: SS CITY-ST-ZIP TITLE NAME STREET ADDRI:SS CITY-ST-ZIP TITLE NAME STREET ADDRI:SS	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD.	DIRECTORS DELETE DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE	ET ADDR ST-ZIP ET ADDR ST-ZIP	ESS		ONS/CHANGES	TO OFF		☐ Char	nge	Addition
12. TITLE NAME STREET ADDRI: SS CITY- ST-ZIP TITLE NAME STREET ADDRI:SS CITY- ST-ZIP TITLE NAME STREET ADDRI:SS CITY- ST-ZIP STREET ADDRI:SS CITY- ST-ZIP	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD.	DIRECTORS DELETE DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	ET ADDR ST-ZIP ET ADDR ST-ZIP ET ADDR	ESS		ONS/CHANGES	TO OFF		☐ Char	nge nge	Addition
12. TITLE NAME STREET ADDRI: SS CITY-ST-ZIP TITLE NAME STREET ADDRI: SS CITY-ST-ZIP TITLE NAME STREET ADDRI: SS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRI: SS CITY-ST-ZIP TITLE	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD.	DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE	ET ADDR ST-ZIP ET ADDR ST-ZIP ET ADDR	ESS		ONS/CHANGES	TO OFF		☐ Char	nge nge	Addition Addition
12. TITLE NAME STREET ADDRI: SS CITY- ST-ZIP TITLE NAME STREET ADDRI: SS CITY- ST-ZIP TITLE NAME STREET ADDR: SS CITY- ST-ZIP TITLE NAME NAME NAME NAME	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD. JACKSONVILLE FL 32244	DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME	ET ADDF ET ADDF ET ADDF ST-ZIP ET ADDF ST-ZIP	ESS		ONS/CHANGES	TO OFF		☐ Char	nge nge	Addition Addition
TITLE NAME STREET ADDRI SS CITY-ST-ZIP TITLE NAME STREET ADDRI SS CITY-ST-ZIP TITLE NAME STREET ADDR SS CITY-ST-ZIP TITLE NAME STREET ADDR SS CITY-ST-ZIP TITLE NAME STREET ADDR SS	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD. JACKSONVILLE FL 32244	DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE	ET ADDR	ESS		ONS/CHANGES	TO OFF		☐ Char	nge nge	Addition Addition
TITLE NAME STREET ADDRI SS CITY-ST-ZIP TITLE NAME STREET ADDRI SS CITY-ST-ZIP TITLE NAME STREET ADDR SS CITY-ST-ZIP TITLE NAME STREET ADDR SS CITY-ST-ZIP TITLE NAME STREET ADDR SS CITY-ST-ZIP	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD. JACKSONVILLE FL 32244	DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME	ET ADDR ST-ZIP ET ADDR ST-ZIP ET ADDR ST-ZIP	ESS		ONS/CHANGES	TO OFF		☐ Char	nge	Addition Addition
12. TITLE NAME STREET ADDR: SS CITY-ST-ZIP	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD. JACKSONVILLE FL 32244	DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-	ET ADDR ST-ZIP ET ADDR ST-ZIP ET ADDR ST-ZIP	ESS		ONS/CHANGES	TO OFF		☐ Char	nge	Addition Addition Addition
TITLE NAME STREET ADDR: SS CITY-ST-ZIP TITLE NAME	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD. JACKSONVILLE FL 32244	DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE	ET ADDR ST-ZIP ET ADDR ST-ZIP ET ADDR ST-ZIP ET ADDR ST-ZIP	ESS ESS		ONS/CHANGES	TO OFF		☐ Char	nge	Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD. JACKSONVILLE FL 32244	DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME	ET ADDR	ESS ESS		DNS/CHANGES	TO OFF		☐ Char	nge	Addition Addition Addition
TITLE NAME STREET ADDR: SS CITY-ST-ZIP TITLE NAME	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD. JACKSONVILLE FL 32244	DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.3 STREE	ET ADDR ST-ZIP ET ADDR ST-ZIP ET ADDR ST-ZIP ET ADDR ST-ZIP ST-ZIP ST-ZIP	ESS ESS		DNS/CHANGES	TO OFF		☐ Char	nge nge	Addition Addition Addition
12. TITLE NAME STREET ADDR: SS CITY-ST-ZIP	D BROWN, ROBERT STEVEN 6220 CARLTON RD. JACKSONVILLE FL 32244 D BROWN, LAURA JEAN 6220 CARLTON RD. JACKSONVILLE FL 32244	DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- 5.4 CITY- 5.5 STREE 5.5 STREE 5.6 CITY-	ET ADDR ST-ZIP ET ADDR ST-ZIP ET ADDR ST-ZIP ET ADDR ST-ZIP ST-ZIP	ESS ESS		ONS/CHANGES	TO OFF		Char	nge nge	Addition Addition Addition Addition

14. Thereby certify that the information supplied with this filing does not qualify or 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 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, with all other like empowered

SIGNATURE: