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 #

(0)

FILED Mar 18 1998 8:00am Secretary of State

MONTY	CONCR	ete, Inc.						
Principal Place	e of Busines	······································	Mailing	Address				
SSAS SHIRLEY STREET SSAS SHIRLEY STREET								
NAPLES FL 34109 NAPLES FL 33942								DO ALOT MONTE IN THIS ORACE
US								DO NOT WRITE IN THIS SPACE
}								3. Date Incorporated or Qualified
2. Principal P	lace of Busi	nnes	2a Mai	ling Address				07/24/1990 4. FEI Number Applied For
21	iace of basis	26	- , -				65-0207421 Not Applicable	
Suite, Apt.	#. etc.		Suite, Apt. #, etc.				\$8.75 Additional	
22				27				5. Certificate of Status Desired Fee Required
City & State	е	City	City & State				6. Election Campaign Financing \$5.00 May Be	
23			28					Trust Fund Contribution Added to Fees
Ľiρ — Žiρ		Country	Zip		h	untry	'	8. This corporation owes or has pald the current year Intangible
24		25	29		30			Personal Property Tax due June 30. 🔀 Yes 🔲 No
		and Address of Curre	n Hegistered	Agent		81	Name	10. Name and Address of New Registered Agent
		Y, ROBERT MARVIN				"	Name	
5545 SHIRLEY STREET						82	Street A	Address (P.O. Box Number is Not Acceptable)
NAPLES FL 33942						B3		
						**		
						84	City	FL 85 Zip Code
44 Purcuant	to the provis	ions of Sections 607.066	12 and 607 15	OS Florida Statut	as the s	hove	a-nemed c	
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 agont, 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.								
agent. La	ım tamihar w	ith, and accept the oblig	ations of, Sec	tion 607.0505, Fi	orida Sta	tutes	3.	
SIGNATURE	Signature, Mode	or printed name of registered ag	ent and title if anni	cable (NO)	E Registere	d Age	ont signature re	re required when reinstating) DATE
12.		OFFICERS AN			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P			DELETE	1.1 T	ITLE		☐ Change ☐ Addition
NAME	MONTG	OMERY,ROBERT MAF	MN		1.2 N	AME	1	
STREET ADDRESS	5545 Sł	HRLEY STREET			1.3 \$1	TREET.	ADDRESS	
CITY-ST-ZIP	NAPLES	FL			1.4 C	ITY - S	T- 21P	
TITLE	VS			☐ DELETE	2.1 TI	ITLE		Change Addition
NAME		omery, robert m .	IR		2.2 N	ÁME	- 1	
STREET ADDRESS		TH AVE S. W.			2.3 \$	TREET	ADDRESS	
CITY-ST-ZIP	NAPLES	<u>FL</u>			2.40	CITY-S	ST-ZIP	
TITLE				DELETE	3.1 1	ITLE	ľ	☐ Change ☐ Addition
NAME					3.2 N		1	
STREET ADDRESS	,						ADORESS	
CITY-ST-ZIP				T Drugge			ST-ZIP	
TITLE				DELETE	4.1 Ti		İ	i L_I Change L_I Addition
NAME					4. 2 N			
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP				DELETE	4.4 CI 5.1 TI	ITY-ST	T-ZIP	Change Addition
TITLE				CT OCCUR			1	There is vooriou
NAME OTDEET ADODESS					5.2 N		ADDOCCO	1
STREET ADORESS							ADDRESS	
CITY-ST-ZIP TITLE				DELETE	5.4 CI	ITY-SI	1 · ZIP	☐ Change ☐ Addition
NAME				- Detter	6.2 N			- Creaty - Aboutor
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP				, i	1	ITY-SI	1	
	ertify that th	e information supplied w	ith this filing o	does not qualify fo				ed 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.—

3/12/97