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

PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M21584

(1)

PHIL VIGNERI CONSTRUCTION, INC.

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address C/O PHIL VIGNERI C/O PHIL VIGNER! 7438 N.W. 49 PLACE 7438 N.W. 49 PLACE LAUDERHILL FL 33319 LAUDERHILL FL 33319 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/07/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2583144 21 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VIGNERI, PHIL 7438 N.W. 49 PLACE 82 Street Address (P.O. Box Number is Not Acceptable) LAUDERHILL FL 33319 83 84 **Sitv** Zip Code 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, typed or printed name of registered agent and the if applicable (NOTE Registered Agent signature required when reinstating) (10/97 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PN DELFTE TITLE 1.1 TITLE Change Addition VIGNERI, PHIL NAME 1.2 NAME R2E034 7438 N.W. 49 PLACE 1.3 STREET ADDRESS STREET ADDRESS LAUDERHILL FL CITY-ST-ZIP 1.4 CITY-S1-ZIP DELETE Change Addition TITLE 2.1 YITLE 22 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE 3.1 TITLE [] Change ■ Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. GITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME **STREET ADDRESS** 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADORESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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. Supplies ental 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 of the executer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if charged, ordin an address.

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