

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

FILED

Mar 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **M34537** (4)
1. Corporation Name
B.L. CONSTRUCTION, INC.

Principal Place of Business
**2131 SW 51ST STREET
FT. LAUDERDALE FL 33312
US**

Mailing Address
**2131 SW 51 COURT
FT LAUDERDALE FL 33312
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2131 SW 51ST CT. Suite, Apt. #, etc. 22 City & State 23 FT LAUDERDALE FL Zip Country 24 33312 25		2a. Mailing Address 26 2131 SW 51ST CT. Suite, Apt. #, etc. 27 City & State 28 FT LAUDERDALE FL Zip Country 29 33312 30		3. Date Incorporated or Qualified 07/01/1986
		4. FEI Number 59-2694663		Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent LACHANCE, DAMIEN 2131 SW 51ST STREET FT. LAUDERDALE FL 33312				10. Name and Address of New Registered Agent			
				81 Name	LACHANCE DAMIEN		
				82 Street Address (P.O. Box Number is Not Acceptable)	2131 SW 51ST COURT		
				83			
				84 City	FT LAUDERDALE	85 State	FL
						86 Zip Code	33312

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE		1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LACHANCE, DAMIEN			1.2 NAME	LACHANCE DAMIEN		
STREET ADDRESS	2131 W 51 COURT			1.3 STREET ADDRESS	2131 SW 51ST COURT.		
CITY-ST-ZIP	FT LAUDERDALE FL			1.4 CITY-ST-ZIP	FT LAUDERDALE FL 33312		
TITLE		<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET ADDRESS			
CITY-ST-ZIP				2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

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 attachment with an address.

SIGNATURE: *Damien Lachance* 3/9/98 954-981-1038

CP2E034 (10/97)