


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

FILED
May 01, 1999 8:00 am
Secretary of State

05-01-1999 90092 046 ***150.00



PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # M69439					
1. Corporation Name J.S. EXCAVATION ENTERPRISE, INC.					
Principal Place of Business 2500 HOLLYWOOD BLVD., STE. 212 HOLLYWOOD FL 33020			Mailing Address 2500 HOLLYWOOD BLVD., STE. 212 HOLLYWOOD FL 33020		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/24/1988	
21		26		4. FEI Number 65-0032193	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For Not Applicable	
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23		28		8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Zip		Country		29	
24		30		9. Name and Address of Current Registered Agent	
25		31		10. Name and Address of New Registered Agent	
26		32		81 Name	
27		33		82 Street Address (P.O. Box Number is Not Acceptable)	
28		34		83	
29		35		84 City	
30		36		85 Zip Code	
31		37		FL	
32		38		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.	
33		39		SIGNATURE	
34		40		Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	
35		41		DATE	
36		42		12. OFFICERS AND DIRECTORS	
37		43		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
38		44		1.1 TITLE	
39		45		1.2 NAME	
40		46		1.3 STREET ADDRESS	
41		47		1.4 CITY-ST-ZIP	
42		48		2.1 TITLE	
43		49		2.2 NAME	
44		50		2.3 STREET ADDRESS	
45		51		2.4 CITY-ST-ZIP	
46		52		3.1 TITLE	
47		53		3.2 NAME	
48		54		3.3 STREET ADDRESS	
49		55		3.4 CITY-ST-ZIP	
50		56		4.1 TITLE	
51		57		4.2 NAME	
52		58		4.3 STREET ADDRESS	
53		59		4.4 CITY-ST-ZIP	
54		60		5.1 TITLE	
55		61		5.2 NAME	
56		62		5.3 STREET ADDRESS	
57		63		5.4 CITY-ST-ZIP	
58		64		6.1 TITLE	
59		65		6.2 NAME	
60		66		6.3 STREET ADDRESS	
61		67		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, with all other like empowered.

SIGNATURE:

J. STABILE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/99

954-925-3355
Daytime Phone #

CR2E034 (11/98)