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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M80514

(6)

FILED Jan 26 1998 8:00am Secretary of State

CORNERSTONE CONTRACTING, INC.				I (DOSTODI) (DI 1818 DOSTI DILBO (1818 DE	01 #1611 0181) 01011 01014 01011 #1611 1081
Principal Place of Business Mailing Address			-	DO NOT WRITE IN THIS SPACE	
US US				3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address				05/12/1988 4. FEI Number	Applied For
	3 5W 132 CT		132 CT	65-0046734	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			<u> </u>
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 MIA			FL	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pa	
24 3311			<u> us</u>	Personal Property Tax due June	30. 🔀 Yes 📙 No
<u> </u>	9. Name and Address of Current	Registered Agent	04 11	10. Name and Address of New Re	gistered Agent
{ CHAPMAN, RICHARD A				ichard A. Chac	man
1	351 SW 152 CT	•		ess (P.O. Box Number is Not Acceptate 1-2-13 SW 132	ple)
MIA	AMI FL 33196		83	-L13 5W 132	CT
			60		
			84 City	Ni a na i	FL 85 Zip Code 33186
11 Pursuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutos	the above-named corpy	Miami	runnee of changing its registered
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 lambage the obligations of, Section 607.0505, Florida Statutes.					
		_1	da Statutes.		1 . 1
SIGNATURE	Signature Typed or printed name of registered agent	and title if applicable (NOTE:	Registered Agent signature require	d when reinstating)	1/14/9% DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TOTLE		Change Addition
NAME	Brown, Jerry A		1.2 NAME		
STREET ADDRESS	27541 SW 154TH AVE		1.3 STREET ADDRESS		
CITY - ST - ZIP	HOMESTEAD FL		1.4 CITY - ST - ZIP		
TITLE	ST	☐ DELETE	2.1 TITLE		Change Addition
NAME	CHAPMAN, RICHARD A		2.2 NAME	,	2:_
STREET ADDRESS	14851 SW 152 CT		2.3 STREET ADDRESS	•	
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP		
TITLE		∐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		1
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME		□ Dereie	4.1 TITLE 4. 2 NAME		E Grange E Addition
i					
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
NAME		DLLLIL	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		_ _	6.2 NAME		= • -
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP			6.4 CITY - ST - ZIP		1
	ertify that the information supplied with	this filing does not qualify for		Section 119 07(3)(i) Florida Statutes I	further certify that the information

Interest certify that the information supplied with his hing does not qualify for the exemptor stated in section 119.07(s)(f), Florida Statutes. Forther 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 a) attachment with an address.

SIGNATURE:

1/4/99