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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # (7)M85785 L.J.O. CONSTRUCTION, INC. Principal Place of Business Mailing Address \$9 SE 9TH ST 39 SE 9TH ST DEERFIELD BCH. FL 33444-1 DEERFIELD BCH. FL 33441-5354 3. Date Incorporated or Qualified 3a. Date of Last Report 06/16/1988 10/10/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0059354 Not Applicable 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing \Box 23 28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 25 🔣 Yes 🔲 No 29 Florida Statutes 30 g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent O'BRIEN, LISA J. 3441 S.W. 16TH COURT 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33312 83 84 City 85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 111000 Change <u>6</u> O'BRIEN, LISA J. NAME 1.2 NAME 3441 S.W. 16TH COURT STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3130116 NAME 3.2 NAME STREET ADDRESS **33 STREET ADDRESS** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition TITLE Change 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change 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 TITLE 6.1 TIFLE NAME 6.2 NAME STREET ADDRESS 6.3 STREFT ADDRESS

4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 eath; 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.

6.4 CITY - ST - 7IP

SIGNATURE:

Low or Briefly

4-30-97 (954)425-0930

FILED

May 15 1997 8:00am

Secretary of State