

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P26749 (2)

1. Corporation Name
P.J. WYER CONSTRUCTION INC.



Principal Place of Business Mailing Address
568 BROADWAY AMITYVILLE NY 11701 US
568 BROADWAY AMITYVILLE NY 11701 US

2. Principal Place of Business 2a. Mailing Address
21 43 ESSEX STREET 26 43 ESSEX STREET
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 BAYSHORE NY 28 BAYSHORE NY
Zip Country Zip Country
24 11706 25 US 29 11706 30 US

3. Date Incorporated or Qualified 10/31/1989 3a. Date of Last Report 02/01/1995
4. FEI Number 11-2514305 Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WYER, JAMES
7300 N.W. 27TH AVE.
OCALA FL 32678

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
UNIT AA9
83 96000 OVERSEAS HWY
84 City KEY LARGO FL 85 Zip Code 33037

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 for person or entity registered agent and the applicable

(If the Registered Agent signature is required when filing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
NAME	WYER, PATRICK	1.2 NAME	
STREET ADDRESS	381 O'CONNOR RD., NORTH	1.3 STREET ADDRESS	
CITY - ST - ZIP	BABYLON NY	1.4 CITY - ST - ZIP	
TITLE	V	2.1 TITLE	
NAME	WYER, JAMES	2.2 NAME	
STREET ADDRESS	21 MALLARD COVE	2.3 STREET ADDRESS	UNIT AA9 96000 OVERSEAS HWY
CITY - ST - ZIP	CENTERPORT NY	2.4 CITY - ST - ZIP	KEY LARGO FL 33037
TITLE	ST	3.1 TITLE	
NAME	WYER, TIMOTHY	3.2 NAME	
STREET ADDRESS	103 HITHERDELL LANE, N.	3.3 STREET ADDRESS	
CITY - ST - ZIP	BABYLON NY	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Timothy P. Wyer, Treas.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/9/96 (516) 665-2111

Daytime Phone

CR2E034 (3/96)