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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9200009354

HOLLYWOOD CONSTRUCTION, INC.

May 04, 1999 8:00 am Secretary of State

05-04-1999 90102 018 ***150.00



	•							1851 (1 865 118 6)	51 886 1884 1898	1411 B181 1 8 86	
Principal Place of Business		Mailing Address	Mailing Address				r samesmai irā tārtā trāst amsts i	BE() BUILL BUILL	49110 (9106 11101		
3003 STATE AVE PANAMA CITY FL 32405 US		P.O. BOX 7429 LAGUNA BCH FL 32413 US					DO NOT WRITE IN THIS SPACE				
00						1	ate Incorporated or Qualifer 2/03/1992	4			
2. Principal F	Place of Business	2a. Mailing Address					El Number		Apr	olied For	
1		26				5	<u>9-3157451</u>		Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	–			5. C	5. Certifcate of Status Desired \$8.75 Additional Fee Required				
City & Sta	te	City & State	 , '			1	lection Campaign Financing	' 🗆	\$5.00 May Be Added to Fees		
Zip	Country 25	Zip 29 3	Country 30				his corporation owes the cu	rrent year In		□No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
GOL	DEN, LINDA P			81							
	3 STATE AVE					ess (P.O. Box Number is Not Acceptable)					
PANAMA CITY FL 32405			Ì	83							
				84	City			FL	85 Zip C	ode	
office or	to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the oblic	e of Florida. Such change was aut	thorized	Dν	the corporati	poration s ion's boar	submits this statement for the of directors. I hereby acc	e purpose of ept the appo	f changing its intment as reg	registered gistered	
SIGNATURE											
	Signature, typed or printed name of registered as	· · · · · · · · · · · · · · · · · · ·		-gen	nt signature require		stating) DDITIONS/CHANGES TO O	DATE A	UD DIBECTO	DC IN 12	
12. OFFICERS AND DIRECTORS 13.			_	1.0		JUITIONS/CHANGES TO C	FFICERS AI	Change	Addition		
TITLE	D	☐ DELETE	1.1 1111	LE	V	PID	1		Citatige	L Addition	

Golden, KONNIE D GOLDEN, RONNIE D 12 NAME 3003 State Ava P.O. BOX 7429 N/A 1.3 STREET ADDRESS STREET ADDRESS PANAMACITY PANAMA CITY FL 1.4 CITY-ST-Z!P CITY-ST-ZIP ☐ DELETE ☐ Change Addition 2.1 TITLE TITLE Golden, LindA 2.2 NAME NAME 3003 State Ave 2.3 STREET ADDRESS STREET ADDRESS PANAMA City, Fl 32405 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition □ DELETE 3.1 TITLE ☐ Change TITLE Howell, ANN 1514 Freeze RA 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS PANAMA City, F1 32404 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change 4.1 TITLE TITLE MERIEUS, THOMAS A. 168 S: SEMO RAN Bluf 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS GRLANDO, F1 32867 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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:

CR2E034 (11/98)