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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000009759 (1)

ATLANTIC COAST CONTRACTING, INC. Mailing Address Principal Place of Business 2031 SW R70TH AVE. 2031 SW R70TH AVE. SUITE C-12 SUITE C-12 DO NOT WRITE IN THIS SPACE DAVIE FL 33317 DAVIE FL 33317 3. Date Incorporated or Qualified 12/03/1992 Applied For 2. Principal Place of Business 26. Mailing Address 4. FEI Number 22-3201177 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Źip Country Zip Country 6. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 Name BERIN, JEFFREY F 324 DATURA STREET 82 Street Address (P.O. Box Number is Not Acceptable) 1110 NORTH OLIVE AVE 83 WEST PALM BEACH FL 33401 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 registured 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 (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition ELLENBOGEN, MARK NAME 1.2 NAME CR2E034 **68 POOR FARM RD** STREET ADDRESS 1.3 STREET ADDRESS **PENNINGTON NJ** CITY-ST-ZIP 1.4 CITY-ST-ZIP DECEME Change Addition TITLE 21 TITEF BLICHER, PETER NAME 2.2 NAME 9 BALDWIN COURT STREET ADDRESS 2.3 STREET ADDRESS **PENNINGTON NJ 08534** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE COFFEY, SEAN D NAME 3.2 NAME 106 BEACON AVE STREET ADDRESS 3.3 STREET ADDRESS SEAGIRT NJ 3 4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 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 CITY-ST-ZIP 6.4 CITY - ST-ZIP City-St-ZiP

14. Thereby certify that the information supply indicated on this annual report or supply officer or director of the corporation with Block 12 or Block 13 if changed, of which with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information following does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information following true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an occiver or the proposered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address:

SIGNATURE:

7-6-98

FILED

Mar 16 1998 8:00am

Secretary of State

(10/97