FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P9300000002 (4) P & H CONSTRUCTION CORP. Principal Place of Business Mailing Address 3221 TAMIAMI TRAIL PO BOX 2900 UNITS F & G PORT CHARLOTTE FL 33952 PORT CHARLOTTE FL 33949-2900 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/12/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 65-0379534 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Etection Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes

May 06 1998 8:00am Secretary of State



Applied For

Not Applicable

9, Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent	
GUARRACINO, PASQUALE 102 SE COLONIAL ST. PORT CHARLOTTE FL 33952		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83		
		84 City	FL 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) DATE				
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT DELETE	1.1 TITLE	☐ Change ☐ Addition	
NAME	GUARRACINO, PASQUALE	1.2 NAME	_ • _	
STREET ADDRESS	102 SE COLONIAL ST	1.3 STREET ADDRESS		
CITY-ST-ZIP	PORT CHARLOTTE FL	1.4 CITY-ST-ZIP		
TITLE	SC □ DELETE	2.1 TITLE	Change Addition	
NAME	GUARRACINO, LYDIA	2.2 NAME		
STREET ADDRESS	102 SE COLONIAL ST	2.3 STREET ADDRESS		
CITY-ST-ZIP	PORT CHARLOTTE FL	2.4 CITY - ST - ZIP		
TITLE	☐ DELETE	3 1 TITLE	Change Addition	
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS	İ	
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE	Change Addition	
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TETLE	DELETE	5.1 TITLE	☐ Change ☐ Addition	
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TIFLE	Change Addition	
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP	1 C - 1 - 10 07/0/C) F1 - 1 - D - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
14. Thereby certify that the information supplied with this filing does not quality 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 confloation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in				

(GUARRACINO PASQUALE PRESIDENT) 4/23/98 (941)627-6422