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**PROFIT** CORPORATION ANNUAL REPORT

1997

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 28 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT #

P93000001040 (3)

SCANDINAVIAN DESIGN & CONSTRUCTION, INC.  Principal Place of Business Mailing Address  1429 N *L* STREET P O BOX 205 LAKE WORTH FL 33460 US  US											
								3. Date Incorporated or Qual 01/06/1993		Date of Last R	eport
2. Principal Pl	lace of Busi	ness	2a. Maili	ing Address			.,,	4. FEI Number			plied For
21			26	_				65-0378739		- <del></del>	t Applicable
Suite Apt. #. etc.			Suite 27	Suite, Apt. #, etc.			5. Certificate of Status Desire	ed 🗆	\$8.75 / Fee Re		
City & State	0		City	& State				6. Election Campaign Finance		\$5.00	May Be
23			28		7 - 6			Trust Fund Contribution		Added (	
<i>Z</i> ip <b>24</b>		Country	Zip		Coun	ntry		8. This corporation has liabili	ty for intang Yes		. 199.032,
24	9 Name	25 and Address of C	29 urrent Registered	Agent	30			Florida Statutes  10. Name and Address of No.			
MAK	(I, TOIVO					81 N	lame				
1429	NORTH '	'L" STREET			Ī	<b>62</b> 8	treet Addre	ess (P.O. Box Number is Not Acc	eptable)		
LAK	e Worth	FL 33400			1	83					
]					1	84 (	City			FL 85 Zip	Code
11. Pursuant office or re	to the provise ogistered ag	sions of Sections 607 gent, or both, in the s ith, and as so, the o	7.0502 and 607,156 State of Florida, Su obligations of, Sect	08, Florida Statu ich change was tion 607,0505, Fl	tes, the abo authorized orida Statu	ove-n	amed corpo e corporation	pration submits this statement for on's board of directors. I hereby			s registered registered
[ again a	itariinida ir	in, chic day,	opugations on oco								
SIGNATUE		2010111111	TOIVO N	UAVI TH				,	APR 6	XI. 1497	• ]
	Signature types	ONE IVI d or printed name of register		NAK) Proceedings (NO	TE: Registered		gnature require	d when re-instating)	DA	31. 1997 TE	
12.			TOWN A red agent and this il applic S AND DIRECTORS	NAK) 7% (NO	TE: Registered .	Ageni s	ignature require	od when renstating)  ADDITIONS/CHANGES TO	DA	TE AND DIRECTOR	S IN 12
12.	D	OFFICERS	red agent and title if applic	NAK) Proceedings (NO	TE: Registered	Ageni s	gnature require	d when re-instating)	DA	ΤE	
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6.3 STREET ADORESS 64 CITY-ST-ZIP

14. I do 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.

APR 21, 1997 SIGNATURE: