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 # P9300009733 (5)

NP CONSTRUCTION CO.

Principal Place of Business	Mailing Address		
1375 KASS CIRCLE SPRING HILL FL 34606	1375 KASS CIRCLE Spring Hill Fl 34606		
US	US THE TE STOOL		

FILED
Mar 09 1998 8:00am
Secretary of State

SPRING HILL FL 34606 EIS		SPRING HILL FL 34606 US		DO NOT WRITE IN THIS SPACE		
US		03		3. Date Incorporated or Qualified		
]				02/01/1993		
2. Principal P	lace of Businoss	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-3167146	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	0	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the cul		
24	25	29	30		Yes No	
	9. Name and Address of Current	Registered Agent		10, Name and Address of New Registered	Agent	
PR	OSCIA, NICHOLAS		81 Name			
	'5 KASS CIRCLE		82 Street Ad	Idress (P.O. Box Number is Not Acceptable)		
(SPI	RING HILL FL 34606		83			
			63			
			84 City	FL	85 Zip Code	
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statute	es, the above-named co	propretion submits this statement for the purpose of	changing its registered	
office or n	egistered agent, or both, in the State of	of Florida Such change was a	authorized by the corpor	ration's board of directors. I hereby accept the app	ointment as registered	
_	in laminar warr, and accept the obligat	ions or, acciron bortoada, Fic	Alba Statutes.		į	
SIGNATURE	Signature, typed or printed name of registered agent	and tite if applicable (NOT)	f : Registered Agent signature rec	quired when reinstaling) DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	DPST	☐ DELFTE	1.1 TITLE		Change Addition	
NAME	PROSCIA, NICHOLAS		1.2 NAME		ļ	
STREET ADDRESS	1375 KASS CIRCLE		1.3 STREET ADORESS			
CITY-ST-ZIP	SPRING HILL FL		1.4 CITY-ST-ZIP			
TITLE	DVP	DELETE	2.1 TITLE		Change Addition	
NAME	PROSCIA, KATHLEEN		2.2 NAME		ļ	
STREET ADDRESS	1375 KASS CIRCLE		23 STREET ADDRESS		İ	
CITY-ST-ZIP TITLE	SPRING HILL FL	DELETE	2.4 CITY+ST-ZIP		Change Addition	
NAME			3.1 TITLE		Cloude C vondout	
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP		1	
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS		ļ	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		\	
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME		Ì	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			54 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			
44 Lherobu e	artify that the information constinct unti-	this filing door not qualify fo	or the exemption stated	in Contino 118 07/2Vi) Florida Statutos I further or	rtifu that the information	

4. I hereby certify that the information supplied with this filling 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 suppliermental 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.

SIGNATURE:

NICHOLAS PROSCIA

X 3/3/98

(354) 688-3606