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 # P93000014859 (1)

PARALLEL BUILDERS INC.

FILED Apr 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
6040 S.W. B4TH STREET SOUTH MIAMI FL 33143		P O BOX 430075 SOUTH MIAMI FL 33243-0075 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
					02/26/1993	
2. Principal Place of Business 2a. Mailing Ar					4. FEI Number	Applied For
21 Suite Ant	26 Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.				65-0431859	Not Applicable
22		27]		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip			ntry	8. This corporation owes or has paid	····	
24	25	29 30			Personal Property Tax due June 30. Yes Yes	
01	9. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New Reg	stered Agent
GERRITS, MICHAEL J 6040 SW 84TH STREET						
SOUTH MIAMI FL 33143				82 Street Addr	ress (P.O. Box Number is Not Acceptable)
			ļ	83		
				84 City		85 Zip Code
dd Darawani	10 th	VI. 1005 1100 (FL
Office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	⊧of Flor≀da. Such change was i	authorized	by the corporat	oration submits this statement for the pul ion's board of directors. I horeby accept	pose of changing its registered the appointment as registered
SIGNATURE		,				
	Signature, typed or printed name of registered ag			Agent signature requir	· · · · · · · · · · · · · · · · · · ·	DATE
12.	PD	ID DIRECTORS DELETE	13.	I F	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
NAME	GERRITS, MICHAEL J	<u> </u>	1.2 NA			Onlingo Addition
STREET ADDRESS	6040 SW 84TH STREET		1.3 S1	REET ADDRESS		{
CITY-ST-ZIP	SOUTH MIAMI FL		1.4 CII	Y-ST-ZIP		
TITLE	VP	DELETE	2.1 717	LF		Change Addition
NAME	MACKLE IV, FRANK 6155 SW 84 ST		2.2 NA			
STREET ADDRESS CITY-ST-ZIP	SOUTH MIAMI FL		1	REET ADDRESS		
TITLE		DELETE	3.1 TIT	TY-ST-ZIP		Change Addition
NAME			3.2 NA	!		
STREET ADDRESS			3.3 S11	REE1 ADDRESS		
CITY-ST-ZIP			3.4. CI	IY-ST-ZIP		
TITLE		DELETE	4 1 T)T			☐ Change ☐ Addition
NAME DYDEET ADDRESS			4. 2 NA	!		
STREET ADDRESS CITY-ST-ZIP				REET ADDRESS		
TITLE		DELETE	9.9 UII 5.1 TII	Y-ST-7IP		Change Addition
NAME			5.2 NA			
STREET ADDRESS			5.3 S1F	REET ADDRESS		
CITY-ST-ZIP			5.4 CI1	Y - ST - ZIP		
TITLE		DELETE	6.1 TIT	1		☐ Change ☐ Addition
NAME			6.2 NA	ł		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP			6.4 CII	Y-ST-7IP		1

14. Thereby 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 eath; that I am an officer or director of the corporation or the receiver or true ee 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.