## 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 # P93000016372 (3)

K & L CONSTRUCTION, CORP.												 		<b>a</b> io
Principal Place of Business Mailing Address  3114 PEACHTREE CR 3114 PEACHTREE CR DAVIE FL 33328 DAVIE FL 33328 US											DO NOT WRIT			JIB 4184 1414
										3. Date Incorporated or Qualified 03/03/1993				
2, Principal P	lace of Busin	noss		2a. Mailing Address					4.	FEI Number <b>65-0407903</b>		-	pplied For lot Applicable	
Suite, Apt.	#, elc.		·····	Suite, Apt. #, etc.					6.	Certificate of Status Desired		\$8.75	Additional	
City & State	9			City & State				-	Election Campaign Financing			May Be		
23		28							Trust Fund Contribution			to Fees		
Z <sub>1</sub> p	Country 25			20	Zip 29		Country 30				This corporation owes or has p			ntangible ⊒ No
[24]	9. Name	_	Address of Curre	ent Registered Agent							Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent			
SUNCINE, JOSEPH									Name				<del></del>	
	4 PEACHT		CIR				82 Street Addre			ess (P.	O. Box Number is Not Accepta	able)		·
DAVIE FL 33328								3						
								14	City				<b>85</b> Zip	Code
												F		
SIGNATURE									the corporation		submits this statement for the pard of directors. I hereby acce	por the ap	opointment as	registered
12.	Signature, typed or printed name of registered of OFFICERS A				AND DIRECTORS			13.			DDITIONS/CHANGES TO OFF		ND DIRECTO	RS IN 12
TITLE	P			DELETE			1.1 TITLE						Change	Addition
NAME	SUNCIN						1.2 NAME							
STREET ADDRESS	DAVIE F		ITREE CIR				1.3 STREET ADDRESS							
CITY-SI-ZIP TITLE	VP VP			☐ DELETE			1.4 CITY - ST - ZIP 2.1 TITLE		- ZIP				Change	Addition
NAME	SUNCIN	IE, L	AVERNE				2.2 NAME						<b>—</b>	
STREET ADDRESS			itree cir					2.3 STREET ADDRESS						
CITY-ST-ZIP	DAVIE F	L				E1 CTC	2. 4 CITY - ST - ZIP 3.1 TITLE					··· · · · · · · · · · · · · · · · · ·	05	g adalas a -
TITLE NAME					☐ DELETE			3.1 IIILE 3.2 NAME					☐ Change	☐ Addition
STREET ADDRESS							3.3 STRE		ADDRESS					
City-St-Zip							3.4. CITY	/- ST	- ZIP					
TITLE	'				□ D	ELETE	4.1 TITLE	E					Change	Addition
NAME								4. 2 NAME						
STREET ADDRESS					4.3 STREET ADDRESS									
CITY-ST-ZIP TITLE			<del></del>			ELETE	4.4 CITY 5.1 TITLE		- ZIP				Change	Addition
NAME					۷ ســ		5.2 NAM							
STREET ADDRESS							5.3 STRE		DORESS					
CITY - ST - ZIP				5 4 CITY-ST-ZIP			1							
TITLE						ELETE	61 TITLE						☐ Change	Addition
NAME							6.2 NAM	E						

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 oath; that I am an officer or director of the corporation or the receiver or trusted 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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

4-12/58

954474-8837

**FILED** 

Apr 17 1998 8:00am

Secretary of State

CHZE034 (10/97)