SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

· 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P93000017250 (0)

Principal Plac	TERRACE	Mailing Address 2872 SW LAKE TER					
PALM CITY FL.	34390	US	PALM CITY FL 34990 US		DO NOT WRITE IN THIS SPACE		
		••			3. Date Incorporated or Qualified 03/08/1993		
2. Principal P	lace of Business	2a. Mailing Addres	2a. Malling Address		4. FEI Number	Applied For	
21		26			65-0415168	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	e	City & State	├		6. Election Campaign Financing	\$5.00 May Be	
23	· · · · · · · · · · · · · · · · · · ·	28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip		Country	8. This corporation owes or has paid the o		
24	25	[29]	30		Personal Property Tax due June 30.	Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FEADV CHAMALY 81 Name							
LEARY, SHAWN K 2872 SW LEKE TERRACE							
PALM CITY FL 34990				82 Street Addr	eet Address (P.O. Box Number is Not Acceptable)		
TALM OILL STAR				83			
				84 City	F	L 85 Zip Code	
11. Pursuan office or agent. I	to the provisions of sections of registered agent, or both, in the am familiar with, and accept the Signature, typed or printed name of regis			above-named corporation ized by the corporation is statutes.	ration submits this statement for the purpose of on's board of directors. I hereby accept the appured when reinsteting)	changing its registered ointment as registered	
12.		ERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE	PSTD	DELE		1 THTLE		Change Addition	
NAME	LEARY, SHAWN K	<u> </u>	-	2 NAME			
STREET ADDRESS 2872 SW LAKE TERRACE		Œ	1.	3 STREET ADDRESS			
CITY-ST-ZIP	PALM CITY FL 34990		1.	4 CITY-ST-ZIP			
TITLE		DELE	TE 2.	1 TITLE		Change Addition	
NAME			2.	2 NAME			
STREET ADDRESS			2.3	3 STREET ADDRESS		•	
CITY-ST-ZIP		F-1		4 CITY-ST-ZIP		/	
TITLE		L DELE	12	1 TITLE		Change Addition	
NAME				2 NAME		ļ	
STREET ADDRESS				S STREET ADDRESS			
CITY-ST-ZIP TITLE		Dele		4 CITY-ST-ZIP 1 TITLE		1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
NAME		[] DELI	·- B	2 NAME		Change Addition	
STREET ADDRESS				3 STREET ADDRESS			
CITY-ST-ZIP				4 CITY-ST-ZIP			
TITLE		DELE		1 TITLE	9DDDD2624	Addition	
NAME				2 NAME	900002624 -08/25/9801007-	- n sn	
STREET ADDRESS			5.3	3 STREET ADDRESS	***150.00	<u></u>	
CITY-ST-ZIP			5.	4 CITY-ST-Z#P			
TITLE		DELE		1 TITLE		Change Addition	

14. I 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, of one attachment with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME STREET ADDRESS

CITY-ST-ZIP

FILED

Aug 24 1998 8:00am

Secretary of State

8-11-98

SK Leary Builders, Inc 2872 SW Lake Terrace Palm City, Fl. 34990

Annual Reports Filing Division of Corp. P.O. Box 6327 Tallahassee, Fl. 32314

To Whom It May Concern:

As per my telephone Conversation with Linda at 850-488-6800 on 8-11-98 I have enclosed a check in the amount of \$150.00. I have submitted the payment late due to the Fact that the First notice was never received. Thanking you in advance for your Cooperation in this matter.

Respect fully, Shavn Kasan