## 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 # P93000023472 (2)

FINN C	ONSTRU	ICTION	CORP.										
Principal Place	e of Busines	s		Ma	ailing Address					i imitalor ing abada birta bibita Obsila di	114 <b>su</b> ji <b>e (i)</b>	<b>86</b> 16671 01841 1 <b>4</b> 1	DIO HEN HEN
12773 W FOREST HILLS BLVD 12773 W FOREST HILLS B							.VD						
#215 #215 WELLINGTON FL 33414 WELLINGTON FL 33414										DO NOT WRITE IN THIS SPACE			
US US									ĺ	3. Date Incorporated or Qualified			
										03/29/1993			
· ·	tace of Busii	ness		2n. Mailing Address				-	4. FEI Number		<u> </u>	oplied For	
Suite, Apt.	# etc		** .	26	Suite, Apt. #, etc.					65-0404327			ot Applicable Additional
22	<b>*</b> , 010.			27					ĺ	5. Certificate of Status Desired			Additional equired
City & State					City & State					6. Election Campaign Financing			May Be
23					28				Trust Fund Contribution			to Fees	
Zıp	Country							Country		8. This corporation owes or has pa	aid the cu		
24	25			29	30			i		Personal Property Tax due June	1		□ No _
	9, Name	and Ad	dress of Current	Regis	tered Agent					10. Name and Address of New Re	gistered	Agent	
MA	RCHBANK	S, LAWI	RENCE J				81	Name					
480	DO N. FEDE		82 Street Addr			Addres	s (P.O. Box Number is Not Accepta	ble)					
SU	TE 101-E									· · · · · · · · · · · · · · · · · · ·			
ВО	CA RATON	i FL 334	131				83	ł					
							84	City				<b>85</b> Zip	Code
								l '			<u> </u>	.	1
11. Pursuant to office of reagent. I as	to the provis egistered ag m familiar w	ions of S jent, or b ith, and a	ections 607.0502 oth, in the State o accept the obligat	and 6 f Florid ions of	07 1508, Florida Statut da. Such change was i l. Section 607.0505, Fli	les, the at authorized orida Stat	d by utes	e-named y the corp s.	corpor	ation submits this statement for the o's board of directors. I hereby acce	purpose o	f changing i pointment as	ts registered registered
SIGNATURE	Signature, typed	or printed r	ame of registered again	and blic	d applicable (NOT	E Registere	d Age	ent eignature	benupen	when reinstating)	DATE		
12.			OFFICERS AND	DIREC	13.				ADDITIONS/CHANGES TO OFFI	CERS AN			
TITLE	D				☐ DELETE	1.1 TE						Change	☐ Addition
NAME	FINN, J					1.2 N/							J
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STREET ADDRESS								ADDRESS					
CITY-ST-ZIP						5.4 CI							1
TITLE					☐ DELETE	6.1 TI		11-21			<del></del>	Change	Addition
NAME	!				<u></u>	62 N		j					

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 frue 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 appropriation or the reconser or fursied empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

STREET ADDRESS

. FINN 4-22-98 561-753-0444

**FILED** 

Apr 30 1998 8:00am

Secretary of State