## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000028874

## Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90116 036 \*\*\*150.00

ON TAR	GET CONSTRUCTION, INC.					
Principal Place of Business  1737 NORTHEAST 26TH DRIVE SUITE 930 FORT LAUDERDALE FL 33334 US  US  Mailing Address 1737 NORTHEAST 26TH DRIVE FORT LAUDERDALE FL 33334 US				DO NOT WRITE IN THIS  3. Date Incorporated or Qualifed		
21 3 2 Suite, Apt.	lace of Business 75 /3 Street #, etc.	2a. Mailing Address 26 3275 /3 Suite, Apt. #, etc.	Street	04/20/1993 4. FEI Number 65-0403796 5. Certificate of Status Desired	<del></del>	
City & State 23 Vere Zip 329	Beach FL.	City & State 28 Vero Beach Zip3 G G A	F1. Country USP	6. Election Campaign Financing Trust Fund Contribution  8. This corporation owes the current year Interpretation Personal Property Tax.	\$5.00 M Added to tangible  Yes	
9. Name and Address of Current Registered Agent  VESEL, BEVERLY L  100 W CYPRESS CREEK RD  SUITE 930  FT LAUDERDALE FL 33309			81 Name	10. Name and Address of New Registered ess (P.O. Box Number is Not Acceptable)		
			83 84 City	FL	85 Zip Co	
A AFFICA AFF	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligated Signature, typed or printed name of registered agent.	of Florida. Such change was authoritions of, Section 607.0505, Florida S	ized by the comoratic			-
12. TITLE NAME STREET ADDRESS	DPS BOTKTN, GERALD 1737 NORTHEAST 26TH DRIVE	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR ☐ Change	S IN 12
CITY-ST-ZIP TITLE NAME	FORT LAUDERDALE FL 33334	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	<u> </u>	DELETE	2.3 STREET ADDRESS 2.4 CITY- ST-ZIP 3.1 TITLE 3.2 NAME	The second secon	☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE			3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		C. a. marga	
TITLE 1			0.7 OIT I OI - DI			

CITY-ST-ZiP 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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

561-563-2695