## 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 # P93000030097 (8)

A AND K BUILT-INS, INC.

## FILED Apr 10 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						r sections are into about the section of the section and section in the local
3377 S.W. 42			3377 S.W. 42ND AVENUE			
PALM CITY F	L 34990	PALM CITY FL 3499	0			DO NOT WEITE IN THIS COACE
						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
						04/20/1993
	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26	26			<b>59-3202063</b> Not Applicable
Suite, Apt.	#, <b>e</b> tc.	Suite, Apt. #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & Stat	0	<b>├─┐</b>	City & State			6. Election Campaign Financing \$5.00 May Be
23			28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	<del></del>	Country		This corporation owes or has paid the current year Intangible
24	25	[29]	30			Personal Property Tax due June 30. X Yes No
	· · · · · · · · · · · · · · · · · · ·	of Current Registered Agent	<del></del>	81	Nama	10. Name and Address of New Registered Agent
	NINO, PETER T			01	Name	
217 EAST OCEAN BLVD. STUART FL 34994				82	Street A	Address (P.O. Box Number is Not Acceptable)
	5/411 1 E 04554			83		
				-	0	
				84	City	FL 85 Zip Code
11. Pursuant to the provisions of Soctions 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its recoffice or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as reginagent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.						
SIGNATURE						
GIGHTATORE	Signature typed or printed name of re-	gistered agent and title if applicable	(NOTE: Registere	d Age	ant signature r	required when reinstating) DATE
12.		CERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D OFFICE	☐ DELETE	1.1 T	ITLE		Change Addition
NAME	JAEGER, GERRY		1.2 N	AME		
STREET ADDRESS	3377 S.W. 42ND AVE.		1.3 \$	1.3 STREET ADDRESS		إ
CITY-ST-ZIP	PALM CITY FL 34990				7 - ZIP	
TITLE		☐ DELETE 21		21 TITLE		L.] Change L. Addition C
NAME			2.2 N	AME		
STREET ADDRESS			2.3 \$	TREET	ADDRESS	• •
CITY-ST-ZIP		D no ore			ST · ZIP	
TITLE		☐ DELETE				Change Addition
NAME			3.2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZiP		DELETE			ST-ZIP	M     1.100
TITLE		☐ DELETE				☐ Change ☐ Addition
NAME			4.21			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		☐ DELETE			T-ZIP	Change Addition
TITLE						LJ Change L_ Addition
NAME			5.2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE	<del></del>	DELETE			1-ZIP	Change Addition
						Change ( Avoille)
NAME OTDEET ADDRESS			62 N		ADDDGGG	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			64C	11Y-S	T-ZIP	

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 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.

NONATURE.

4/4/98