## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000043343 (1)

## FLORIDA DESIGN AND CONSTRUCTION CORPORATION

Principal Place of Business

252 N KROME AVE HOMESTEAD FL 33034 Mailing Address

9400 SOUTH DADELAND BLVD. PENTHOUSE 1 FILED
Sep 03 1997 8:00am
Secretary of State



HOMESTEAD FL 33034 US		PENTHOUSE 1 MIAMI FL 33156		DO NOT WRITE IN THIS SPACE				
		-			3. Date Incorporated or Qualified 06/18/1993	3a. Date 07/23	of Last F	•
	lace of Business	2a. Mailing Address	-4 -	. 1	4. FEI Number		A	oplied For
21 10 N	, <u> </u>		<u>Lq                                    </u>	<del>}†</del> •	65-0437153		N	ot Applicable
Sulte, Apt.		Suite, Apt. #, etc.			6. Certificate of Status Desired			Additional equired
City & State	1. 011 171	City & State, 28 Florida	Cirty	, FL	Election Campaign Financing     Trust Fund Contribution			May Be to Fees
24 330	34 25 USA	29 33034	Country 30	SA	This corporation owes or has pai Personal Property Tax due June		-	tangible No
	9. Name and Address of Current F	Registered Agent			10. Name and Address of New Reg	istered Age	nt	
MA	as, John P		81	Name				
	V OFFICES OF HELLMAN & MAAS	}	82	Street Ad	dress (P.O. Box Number is Not Acceptab	e)		· · · ·
	NE 16 STREET					· · · · · · · · · · · · · · · · · · ·		
HO	MESTEAD FL 33030		83					
			84	City		FL	15 Zip	Code
11. Pursuant I office or re agent. I as	to the provisions of Sections 607.0502 a egisterod agent, or both, in the State of m familiar with, and accept the obligation	and 607.1508, Florida Statute: Florida. Such change was au ons of, Section 607.0505, Flor	s, the abov uthorized b rida Statute	e-named co y the corpor s.	rporation submits this statement for the parties attended attended to the parties of the parties are attended to the parties attended to t	urpose of ch t the appoin	anging i	ts registered registered
SIGNATURE								<del></del>
12.	Signature, typed or printed name of registered agent a OFFICERS AND I		Hogislored Ag	ent signature req	uired when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE EDS AND DI	DECTO	00 IN 10
TITLE	P	DELETE	1.1 TOLE		ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	SHIVER, SHERI	_	1.2 NAME					
STREET ADDRESS	9400 SOUTH DADELAND BLVD.	, PENTHOUSE 1		T ADDRESS				
CITY-ST-ZIP	MIAMI FL 33156		1.4 CITY-3	1				
TITLE	ST	☐ DELFTE	2.1 TITLE				Change	☐ Addition
NAME	<b>S</b> HIVER, STEPHEN		2.2 NAME					
STREET ADDRESS	9400 SOUTH DADELAND BLVD.	, PENTHOUSE 1	2.3 STREE	T ADDRESS				
CITY-ST-ZIP	MIAMI FL 33156		2.4 CITY-	S1-ZIP				
TITLE		DELETE	3.1 TITLE				Change	Addition
NAME			3.2 NAME		$\dot{i}$			
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-2IP			3.4. CITY-	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 City-5	ST - ZIP				
TITLE		☐ DELETE	51 THTLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY - 9	ST - ZIP				
TITLE		☐ DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY - 9	ST-ZIP				

I do 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 of the receiver or trusfee 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 an attachment with an address.