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

DOCUMENT # P93000048692 (6)

FILED Sep 24 1998 8:00am Secretary of State

GROSZ & STAMPER CONSTRUCTION CO., INC.								
J.,,,,,,						i Labindar (ild iblan binn abnir banir berit	AANN ANAAN HAMA ANNA KANA MARKAAN	
Principal Place of Business Mailing Address						Y LOBELDDE THE OREME TOLLS MARKET MARIN MARIN	Mitres Militer steile Beiter feiten siet wool	
8910 N 16TH ST 8910 N 16TH ST						}		
TAMPA FL 33612 TAMPA FL 33612						DO NOT WRITE IN THIS 8PACE		
•						3. Date Incorporated or Qualified	1110017102	
						07/06/1993		
2. Principal Place of Business 2a. Malling Addre						4. FEI Number	Applied For	
21		26			59-3190644	Not Applicable		
Suite, Apt	. #, etc.	Sulte, Apt. #, etc.	¬			5. Certificate of Status Desired	\$8.75 Additional	
22 City & Sta	te .		City & State			6 Florian Commission Floring	Fee Required	
23		⊢ ¬ '	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country Z _I p					8. This corporation owes or has paid the		
24	25	29	30			Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Currer	t Registered Agent		81 N		10. Name and Address of New Register	ared Agent	
STAMPER, NEAL E					lame		:	
9310 N 16TH ST				82 S	treet Addres	ess (P.O. Box Number is Not Acceptable)		
IAN	IPA FL 33612			83				
ı	_			[83]				
	. \cap			84 C	ity		FL 85 Zip Code	
11. Pursuan	t to the provisions of sections 607.050	2 and 607.1508. Florida Statut	es the ab	ove-nan	ned corpora		· • • • • • • • • • • • • • • • • • • •	
office or	registered agent, or both, in the State	of Flerida. Such change was	authorized	d by the	corporation	ation submits this statement for the purpose n's board of directors. I hereby accept the a	ppointment as registered	
SIGNATURE	10.75	300000000000000000000000000000000000000	Olida Stai	ulos.		9.	12.98	
	Signature, typed or printed name of registered ager	·		red Agent	signature require	ed when reinstaling) DA	ATE	
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER		
TITLE NAME	STAMPER, NEAL E	DELETE	1.5 TO		}		Change Addition	
STREET ADDRESS		AAA ALAATILAT		1.2 NAME 1.3 STREET ADDRESS			· .	
CITY-ST-ZIP	TAMPA FL 33612		4	NEC I ALIDI TY-ST-ZIP	RESS			
TITLE	P	DELETE	2.1 Til				Change Addition	
NAME	STAMPER, NEAL E.	1	2.2 NA	ME				
STREET ADDRESS	9310 N 16TH ST.		2.3.ST	REETADDE	RESS		.:	
CITY-ST-ZIP	TAMPA FL		2.4 CI	TY-ST-ZIP			<u>i</u>	
TITLE	VP	DELETE	3.1 TU	LE			Change Addition	
NAME	GROSZ, TIMOTHY L.		3.2 NA		}		}	
STREET ADDRESS	ralina El		- 1	REET ADDA	RESS		}	
CITY-ST-ZIP TITLE	TAMPA FL S		3.4 CITY-S 4.1 TITLE					
NAME	GROSS, TIMOTHY L.	DELETE	ı		1		Change Addition	
STREET ADDRESS	9310 N. 16TH ST.		4.2 NA	ime Reet adde	DE SE		. A	
CITY-ST-ZIP	TAMPA FL			KEET AUDI TY-ST- Z IP	,		20	
TITLE	T	DELETE	5.1 TIT				Change Addition	
NAME	STAMPER, NEAL E.	F-3 2-4-16	5.2 NA		ĺ		FT Cusude FT vocition	
STREET ADDRESS	9310 N. 16TH ST.		5.3 \$70	REET ADD	RESS			
CITY-ST-ZIP	TAMPA FL		5.4 CI1	Y-ST-ZIP				
TITLE	-	DELETE	6.1 TIT	LE	1		Change Addition	
NAME			6.2 NA	ME			j	
STREET ADDRESS			6.3 \$17	REET ADDF	RESS			
CITY-ST-ZIP	addition the lefe and the second of the seco	Attaches de la companya de la compan		Y-ST-ZIP	last to so di	440.07/00/0 51-12-0		
i i nereby c	erury that the information supplied with	this illing does not qualify for t	ne exemp	uon stal	ted in sectio	on 119.07(3)(i), Florida Statutes. I further ce	ruly that the information	

4. 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 tile receiver of trustee explowered 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 a lattachine of the property of the corporation of the receiver of the rece

SIGNATURE:

West Planting I

4.17.48

(813) 930.0664

:R2F034 (5/98)