## 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 # P93000049799 (8)

LES SEEBER, JR. CONSTRUCTION, INC.

## **FILED** May 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 11440 S.W. 130TH AVE 11440 S.W. 130TH AVE. DUNNELLON FL 94432 **DUNNELLON FL 34432** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/09/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 005.W.178 Ave 5W178Ave 65-0422364 Not Applicable Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Jountry 8. This corporation owes or has paid the current year Intangible 25 BROWARD 29 335
Name and Address of Current Registered Agent BROWARD □ No Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 81 Name SEEBER, LES JR 5900 S.W. 178TH AVE. R2 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33331 83 City Zip Code 85 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 registered office 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DPS DELETE TITLE 11 TITLE ☐ Change Addition NAME SEEBER, LES JR. 1.2 NAME CR2E034 STREET ADDRESS 5900 S.W. 178TH AVE. 1.3 STREET ADDRESS FT. LAUDERDALE FL 33331 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 City-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-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 Statules. 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.

CICNATUDE

4-27-98