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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 1. Corporation Name

P93000057020 (8)

H.R.C. CONSTRUCTION, INC.

Principal Place	e of Business	Mailing Address		- F CORPACÍDO) CINO CORROD TRIBAS ORDERE ARBITAL MADAL	i mātāl ātiet laak eqijā jinit nait jani
P.O. BOX 6199 P.O. BOX 6199 LAKE WORTH FL 33466 LAKE WORTH FL 33466-61			199		
				3. Date Incorporated or Qualified 08/11/1993	3a. Date of Last Report 05/21/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0457241	Not Applica
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	6	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032
24	25	29	30		Yes No
	9, Name and Address of Current	Registered Agent		10. Name and Address of New Reg	platered Agent
164 SUI	Pir, M. Richard 15 Palm Beach Lakes Blvd. Te 1200 St Palm Beach Fl 33401		540 340	ICH, HARRY ress (PO Box Number is Not Acceptable F TIMBER VALLEY	
11. Pursuant office or ragent La	to the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	2 and 607.1508, Florida Statute of Florida. Such change was a tions of Section 607.0505, Flo	es, the above-named corporate the corporate structures.	coration submits this statement for the policin's board of directors. I hereby accept	rpose of changing its register tithe appointment as registere
SIGNATURE	HARRY RANCH				4-23-47
	Signature, typod or printed name of registered agen		Pagistered Agent signature regul		DATE
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	
TrillE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addi
NAME	RAUCH, HARRY		1.2 NAME		
STREET ADDRESS (	5904 TIMBER VALLEY DRIVE		1.3 STREET ADDRESS		
CITY - S1 - ZIP	LAKE WORTH FL 33463		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addi
KAMÉ			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS	1	.1
City-S1-ZiP			2. 4 CITY-ST-ZIP		
THILE		DELETE	3.1 TITLE		Change Addi
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Add
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-S1-7IP			4.4 City-ST-ZiP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addi

6.4 CITY-ST-ZIP 14. 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 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.

52 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

5.4 CITY-ST-ZIP

DILLE NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

HALLY RAVEH

4-23-67

561-9660419

Change

Addition

**FILED** 

May 01 1997 8:00am

Secretary of State