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 # P93000057020 (8)

H.R.C. CONSTRUCTION, INC.

FILED Apr 29 1998 8:00am Secretary of State



| L | | | | | | | 48 1 68 1 1 1 1 | | AN BAN IRBI | |
|---|--|---|---------------------------|---------------------|--|----------------------------|---|---------------------------------------|-----------------|--|
| Principal Plac | i saantaan see ib | 80 310)) 00 180 00 41) | 96isi Abibi Bilis IA | 1831 BEING 110 | HE BON IND! | | | | | |
| P.O. BOX 6199 P.O. BOX 6199 | | | | | | | | | | |
| LAKE WORTH FL 33466 LAKE WORTH FL 33466 | | | | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | 3. Date Incorpora | | | | | |
| 1 | | | | | 08/11/1993 | | | | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4, FEI Number | · | - | Ar | pplied For | |
| 21 1/7 | 6 JOG ROAD | 26 | | | 65-04572 | 41 | | No | ot Applicable | |
| 21 2176 TOG ROAD 26 Suite, Apt. #, etc. | | | | | 5. Certificate of S | | | \$8.75 | Additional | |
| 27 | | | | | g, Certificate of 3 | atus Desireo | | Fee Re | equired | |
| City & State City & State | | | | | 6. Election Camp | | | | May Be | |
| 23 GLEENACKES FC 28 Zip Country Zip | | | Coun | | Trust Fund Cod | | | | to Fees | |
| Zip | | | | try | 8. This corporation | | | | | |
| 24 334 | 25 [25] 9. Name and Address of Curren | 29 | [30] | | Personal Property 10. Name and Ad | | | | _] No | |
| | | it Lodistored Wheter | | Name | | | Indiate on va | Joint | | |
| | UCH, HARRY | | | R | AUCH, HAKK | 4 | | | | |
| 5904 TIMBER VALLEY DRIVE SUITE 1200 | | | | Street | Address (P.O. Box Number 176 Tot Ko | r is Not Accept | able) | | ļ | |
| | | | l _e | <u></u> | 116 408 K | HE | | | | |
| , M | KE WORTH FL 33463 | | L | - | | | | | | |
| | | | Ē | 4 City | REENACRES | | FL | 85 Zip (| Code 3 4 / 5 | |
| 11 Purcuent | to the provisions of Sections 607 050 | 12 and 607 1508 Florida Statut | es the ehr | nve-named | corporation submits this s | tatement for the | | نــــــــــــــــــــــــــــــــــــ | s 7/5 | |
| office or r agent. I a | to the provisions of Sections 607.050 registered agont, or both, in the State im familiar with, and accept the obligi | of Florida, Such change was a ations of, Section 607,0505, Flo | authorized orida Statu | by the corr tes. | poration's board of directo | s. I hereby acc | ept the appoir | ntment as | registered | |
| SIGNATURE | | | | | | | | | | |
| Signature, typod or printed have of registered open and fille it applicable (NOTE R 12. OFFICERS AND DIRECTORS | | | | Agent signature | required when reinstating) ADDITIONS/CH | NGES TO OFF | DATE FICERS AND F | IRECTOR | 3S IN 12 | |
| TITLE | D | DELETE | 13. 1.1 Titu | F | (6.1 | | 7 | Change | Addition | |
| NAME | RAUCH, HARRY | | 1.2 NAM | - IE | RAUCH, HAR 2176 JOG A GREENACKE | RY | | | | |
| STREET ADDRESS | 5904 TIMBER VALLEY DRIVE | | | ET ADDRESS | 3176 506 | OAR | | | | |
| CITY-ST-ZIP | LAKE WORTH FL 33463 | | | -ST-ZIP | GREKNIACIE | CLI | 334/ | < | ľ | |
| TITLE | | DELETE | 2.1 TITL | <u> </u> | | | T. | Change | ☐ Addition | |
| NAME | | | 2.2 NAM | KE | | | | | | |
| STREET ADDRESS | | | 2.3 STRE | ET ADORESS | | | | | | |
| CITY-ST-ZIP | | | | r-ST-ZIP | | * | r ^a nt | | | |
| TITLE | | DELETE | 3.1 TITLI | | | | L | Change | ☐ Addition | |
| NAME | | | 3.2 NAM | IE : | | | | | | |
| STREET ADDRESS | | | 33 STRE | ET ADDRESS | | | | | J | |
| CITY-ST-ZIP | | | 3 4. CITY | 1-ST-ZIP | _ | | | | | |
| TITLE | | DELETE | 4.1 1011.1 | | | | | Change | Addition | |
| NAME | | | 4. 2 NAN | AE | | | | | Į | |
| STREET ADDRESS | | | 4.3 STR | EET ADDRESS | | | | | ļ | |
| CITY-ST-ZIP | <u> </u> | | 4.4 CITY | -ST-ZIP | | | | | | |
| TITLE | | ☐ DELETE | 5.1 T(T). | E | | | L | Change | Addition | |
| NAME | | | 5.2 NAM | IE | | | | | | |
| STREET ADDRESS | | | 5.3 STRE | ET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | 5.4 CITY | -ST-ZIP | | | | | | |
| TITLE | | DELETE | 6 1 TITL | E | | | | Change | ☐ Addition | |
| NAME | | | 6.2 NAM | IE . | | | | | | |
| STREET ADORESS | | | 6.3 STAE | ET ADDRESS | | | | | , | |
| CITY-ST-ZIP | | | 6.4 CITY | -ST-ZIP | | _ | | | | |
| 44 11 | and the state of t | | | | | | | | | |

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 suppliemental 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.

SIGNATURE: