SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 5, 1995.
AMOUNT DUE ON OR BEFORE 8/5/95: $275 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG -8 AM 4:23

DOCUMENT # **P93000065137 (0)**

1. Corporation Name
SOUTHERN CROSS CONSTRUCTION & ENGINEERING, INC.

Principal Place of Business	Mailing Address
1718 CAPE CORAL PARKWAY CAPE CORAL FL 33904	1718 CAPE CORAL PARKWAY CAPE CORAL FL 33904

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/15/1993
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 5337 BAY SHORE AVE
22 Suite, Apt. #, etc.
23 City & State: CAPE CORAL, FL
24 Zip: 33904 25 Country: LEE

2a. Mailing Address
26 5337 BAY SHORE AVE
27 Suite, Apt. #, etc.
28 City & State: CAPE CORAL, FL
29 Zip: 33904 30 Country: LEE

4. FEI Number: APPLIED FOR 65-0584772 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 109.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

DAVIS, MADELINE M
1718 CAPE CORAL PARKWAY
CAPE CORAL FL 33914

10. Name and Address of New Registered Agent

81 Name: THOMAS J. DAVIS
82 Street Address (P.O. Box Number is Not Acceptable): 5337 BAY SHORE AVE
83
84 City: CAPE CORAL FL 85 Zip Code: 33904

11. Pursuant to the provisions of Sections 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: Thomas J. Davis — JUNE 31, 1995
Signature, Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PT	11 TITLE	PRESIDENT & TREASURER	☒ Change ☐ Addition
NAME	DAVIS, MADELINE M	12 NAME	THOMAS J. DAVIS	
STREET ADDRESS	1718 CAPE CORAL PARKWAY	13 STREET ADDRESS	5337 BAY SHORE AVE	
CITY-ST-ZIP	CAPE CORAL FL	14 CITY-ST-ZIP	CAPE CORAL, FL 33904	
TITLE	VS	21 TITLE	VICE PRESIDENT	☒ Change ☐ Addition
NAME	DAVIS, ERIC E	22 NAME	ERIC E. DAVIS	
STREET ADDRESS	152 S.W. 47TH TERRACE	23 STREET ADDRESS	5337 BAY SHORE AVE	
CITY-ST-ZIP	CAPE CORAL FL	24 CITY-ST-ZIP	CAPE CORAL, FL 33904	
TITLE		31 TITLE	SECRETARY	☐ Change ☒ Addition
NAME		32 NAME	C. C. CRINER	
STREET ADDRESS		33 STREET ADDRESS	5256 LA RODA AVE	
CITY-ST-ZIP		34 CITY-ST-ZIP	LOS ANGELES, CA 90041	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Thomas J. Davis (THOMAS J. DAVIS) 6/3/95 941-549-5991
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

01C0978 CP