## 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 # P93000081541 (3)

LINDAHL CONSTRUCTION, INC.

## FILED Apr 22 1998 8:00am Secretary of State

4/14/08

CINOA	IIC OONO		140.						
Principal Piac	ce of Busines	:S	Mai	ling Address				T LEADHON' HE FORE LIKIN BELLY BRILL ENLY BRISH TOTAL KIRDN DININ HOOM DININ	
12408 44TH AVE W P.O. BOX 297									
CORTEZ FL 34215 CORTEZ FL 34215								DO NOT WRITE IN THIS SPACE	
US								3. Date Incorporated or Qualified	
								11/29/1993	
2. Principal F	Place of Busi	ness	2a.	2a. Mailing Address				4. FEI Number Applied For	ᅥ
21				26				65-0450579 Not Applica	ole
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional	
22				27				Fee Hequired	$\dashv$
City & State				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
<b>23</b> Zip		Country		Zip Country				8. This corporation owes or has paid the current year Intangible	$\dashv$
24	25			30				Personal Property Tax due June 30. Yes No	}
	9, Name	and Address of	29   Current Registr	red Agent	11			10. Name and Address of New Registered Agent	
LII	NDAHL, STI	even m				81	Name		
12408 44TH AVE W						62	Street Addre	ess (P.O. Box Number is Not Acceptable)	ᅱ
CORTEZ FL 34215									
						83			
					1	64	City	B5 Zip Code	
44 Discussions	to the provide	ions of Costians (	207.0500 254.60	7 1500 Elorida State	itos the se		namad aara	oration submits this statement for the purpose of changing its register	
office or	registered ac	gent, or both, in th	e State of Florida	s. Such change was Section 607.0505, F	s authorized	by	the corporation	ion's board of directors. I hereby accept the appointment as registerer	Ē
	Signature, typed	for printed name of regu				Ager	nt signature require	ed when reinstating) DATE	
12,	1 0	OFFICE	RS AND DIREC	DELETE	13.	_		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	100
TITLE		IL, STEVEN M		1.3 12				i cisulite i vani	1011
STREET ADDRESS	<b>5</b> 03 72						ADDRESS		
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STREET ADDRESS							ADORESS		
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STREET ADDRESS					5.3 STP	REET .	ADDRESS		ŀ
CITY-\$1-ZIP					5.4 CIT	Y-\$1	T-ZIP		
TITLE				DELETE	6.1 TIT			Change Addi	ion
NAME					6.2 NA				
STREET ADDRESS	1						ADDRESS		
CITY-ST-ZIP	nortific that at	o information as	plind unth this fil	ng door not evelit.	for the ever			Section 119.07(3)(i), Florida Statutes. I further certify that the informati	=
Indicated officer or	d on <b>thi</b> s anno r dir <b>ect</b> or of th	ual report or supp	lemental annual the receiver or tr	report is true and ac ustee empowered to	ccur <b>ate</b> and c execute th	tha	at my signatur report as requ	Section 119.07(3)(i), Florida Statutes. I further certify that the illionnatine shall have the same legal effect as if made under oath; that I am an united by Chapter 607, Florida Statutes; and that my name appears in	<b>7</b> 1