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PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P93000085726 (6)

CORINCO CONTRACTING, INC.



Principal Place of Business

8391 CURRENCY DRIVE BAY 101 RIVIERA BEACH FL 33404

Mail/A/E Use

8391 CURRENCY DRIVE BAY 101 RIVIERA BEACH FL 33404

2 Principal Place of Business

2a. Mail/A/E Use

21 6183 riverwalk ln.

26 6183 riverwalk ln.

22 2

27 2

23 Jupiter FL

28 Jupiter FL

24 33458 25 USA

29 33458 30 USA

9. Name and Address of Current Registered Agent

FORTUNATO, STUART 8391 CURRENCY DRIVE BAY 101 RIVIERA BEACH FL 33404

81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City

FL 85 Zip Code

11. I, the undersigned, as Secretary of the State of Florida, do hereby certify that the above named corporation submits this statement for the purpose of changing its registered office to the principal place of business in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am authorized to accept the corporation's filing of this statement, Florida Statutes.

OFFICERS

12. Name, Title, and Address of Officers and Directors

D FORTUNATO, STUART 6183-2 RIVER WALK LANE JUPITER FL 33458

13.

1. TITLE 1. NAME 1. STREET ADDRESS 1. CITY, ST, ZIP 2. TITLE 2. NAME 2. STREET ADDRESS 2. CITY, ST, ZIP 3. TITLE 3. NAME 3. STREET ADDRESS 3. CITY, ST, ZIP 4. TITLE 4. NAME 4. STREET ADDRESS 4. CITY, ST, ZIP 5. TITLE 5. NAME 5. STREET ADDRESS 5. CITY, ST, ZIP 6. TITLE 6. NAME 6. STREET ADDRESS 6. CITY, ST, ZIP

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

V.P. Robert Truato 6183-2 riverwalk ln. Jupiter FL 33458

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included in 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. I am an officer or director of the corporation or holder of a power to exercise this report as required by Chapter 607, Florida Statutes, and that my name appears in Part 12 or 13 of this report, or an attachment with an address.

SIGNATURE:

[Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-21-96

407 745-0209

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