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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400009825 (8)

POSTON AND STRAUGHN CONSTRUCTION, INC.

Principal Place of Business		Mailing Address			E 103KATL 145 ADINI DIBLIC 80KH BONT ODNIK TOLIA IBLIA TONIN TIDDIC BILL JEDI		
7/522 OVERSEAS HIGHWAY ISLAMORADA FL 33036 US		P.O. BOX 924702 HOMESTEAD FL 33082-4702 US					
			470		3. Date Incorporated or Qualified 01/31/1994	3a. Date of Last 05/28/1996	Report
L	Place of Business	2a. Mailing Address			4. FEI Number	 	Applied For
Suite An	* # ctv	Suite, Apt. #, etc.			65-0472970	CO 75	Not Applicable Additional
22 22	. F . 6tc	27			5. Certificate of Status Desired	1 1 7	Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
23		28	<u>-</u>		Trust Fund Contribution	Added	l to Fees
Zip 24	Country	Zip	Country		8. This corporation has liability for	intangible tax under Yes No	s. 199.032,
24	25 g. Name and Address of Currer		30	·	Florida Statutes 10. Name and Address of New Re		
ST	RAUGHN, MARJORIE		81	Name			
	1 NORTH 69TH TERRACE		82	82 Street Address (P.O. Box Number is Not Acceptable)			
HOLLYWOOD FL 33024							
ŀ			83	1.			
{			84	City		FL 85 Zip	Code
11. Pursuar	nt to the provisions of Sections 607,050	02 and 607.1508, Florida Statutes	s, the abov	e-named cor	rporation submits this statement for the p	purpose of changing	its registered
office of agent 1	r registored agent, or both, in the State Lam familiar with, and accept the oblig	of Florida. Such change was au lations of, Section 607.0505, Flor	ithorized b ida Statute	y the corpore s	ation's board of directors. I hereby acce	pt the appointment a	is registered
SIGNATURE							
	Segreture: type dilox printe dinamo of registered ag-	ent and life if applicable (NOTE: ID DIRECTORS	Registered Ag	ent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTO	DS IN 12
12,	P	DELETE	1.1 TITLE	<u>, i </u>	ADDITIONS/CHANGES TO OFFIC	Change	
NAMI	STRAUGHN, MARJORIE	_	1.2 NAME				
STREET ADORESS			1.3 STREE	T ADDRESS	·		'
CITY-ST-ZIP	HOLLYWOOD FL 33024		1.4 CITY-	ST-ZIP			
TITLE	VPS	DELETE	2.1 TITLE			Change	Addition
NAVE environment	STRAUGHN, JESSE 5 701 NORTH 69TH TERRACE		2.2 NAME	T ADODECC			
STREET ADDRÉS: CITY: \$1-ZIP	HOLLYWOOD FL 33024		2.4 CITY-	T ADDRESS			;
Ditt	D	S DELETE	3 1 TITLE			Change	Addition
NAMI	THOMPSON, ROBERT	,	3.2 NAME	•			•
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-S1-ZII	DAVIE FL 33314	T briefr	3.4. CITY	ST-ZIP		70	. I dalika
THE		L] DELETE	4.1 TITLE	.		Change	Addition
NAMÉ STREET ADDRASA			4. 2 NAME	T ADDRESS	•		
CITY - ST - ZIP			4.4 CITY-				
THE		DELETE	5 1 TITLE			☐ Change	Addition
NAME.			5.2 NAME				-
STREET ADDRESS	S		5.3 STREE	T ADDRESS			
CHY-ST-ZIF		PINET	5.4 CITY	ST-ZIP		T104	Lebasic -
THE		DELETE	6.1 TITLE	-		Change	Addition
NAME STREET ADDRESS			6.2 NAME	T ADDRESS			
SINCE ADDRES	"		0.5 3 Inte	I VIDUESO			

14. Ido 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 if an arriclinger 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

SIGNATURE:

appears in Block 12 or Block 13 if changed,

Mayorie Straughen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-97 305-245-2719

FILED

Apr 22 1997 8:00am

Secretary of State