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

CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS



## Sendra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## **DOCUMENT #** P94000031475 (4)

	JNDERWOOD CONSTRUCTION DESCRIPTION DEST	Mailing Address 1907 SECOND ST SOUTH DAYTONA FL			
300,000	· · · · · · · · · · · · · · · · · · ·	SOUTH BALLOWN FL	/	DO NOT WRITE IN TH	IS SPACE
'	REVISED			3. Date Incorporated or Qualified	
	· L			04/26/1994	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1575	AVIATION CENTER PKMY	26 1575 AVIAT	ION CENTER M	sucy 59-3241804	Not Applicable
Suite, Apt	W. etc.	Suite, Apt. #, etc.			\$8.75 Additional
2 Suite	€ 507	27 SUITE 50	·7	5. Certificate of Status Desired	Fee Required
City & Sta	te .	City & State		6. Election Campaign Financing	\$5.00 May Be
3 DAV	JONA PICH, FL.	28 DAYTONA BE	EACH, FL.	Trust Fund Contribution	Added to Fees
Zip	Country	Ζφ	Country	B. This corporation owes or has paid the	
a 3211	Y 25 USA	29 32114	30 USA	Personal Property Tax due June 30.	☐ Yes ☐ No
-1	p. Name and Address of Current			10. Name and Address of New Registers	od Agent
116	IDERWOOD, MIKE		81 Name		
	OV SECOND SIP 293	KIVERSEN'S IE	Street A	ddress (P.O. Box Number is Not Acceptable)	
	ORA	NONS BCh, FL	83		
		3217	u 🎳		
		2011	84 City		85 Zip Code
			1 1 1	<b>F</b>	LII
office or agent. I s SIGNATURE	registered agent, or both, in the State am familiar with, and accept the obligation state, by a complete of registered agents.		authorized by the corporida Statutes.  E. Rogistered Agent signature in	corporation submits this statement for the purpose oration's board of directors. I hereby accept the a	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	- CONTRACTOR AND TO ON TOTAL OF	Change Addition
NAME	UNDERWOOD, MIKE	<del></del>	1.2 NAME		- v —
STREET ADDRESS	1907 SECOND ST			205 Purchash RN	
	SOUTH DAYTONA FL		1.0 STREET MUDRESS	295 RIVERBEUD RD ORMOND BChi. FL. 32	เวป
CITY - ST - ZIP	DOUT DATIONALE	DELETE		CKMOND BONI, I'C. 32	Change Addition
TITLE	1		2.1 TITLE		L virange L Roullion
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP			2. 4 CiTY-ST-ZiP		· · · · · · · · · · · · · · · · · · ·
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME	!		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	1				
· w drit.	1		M 4 2 NAME I		
CTDCCT ADDRESS			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP		DECETE			Change Addition

CITY-ST-ZIP 64 CITY-ST-ZIP 14. 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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that f 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.

5.2 NAME

6.1 TITLE 6.2 NAME 63 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

DELETE.

Change

☐ Addition

**FILED** 

Apr 20 1998 8:00am

Secretary of State