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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

FILED Mar 04 1998 8:00am Secretary of State

DOCUMENT # P9400032546 (1)													
AMERISTAR CONSTRUCTION COMPANY									[
Principal Place of Business Mailing Address										4 (ABLIRBLING ABIN BIBIN BRIN BRIN BRIN BRIN	[4164		
2314 HAYES ST. 2314 HAYES ST.													
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020										DO NOT WOITE IN			
									ŀ	DO NOT WRITE IN 3. Date Incorporated or Qualified	1 1HIS SI	ACE	
										04/28/1994			
2. Principal P	Place of Busi	ness	· · · · · · · · · · · · · · · · · · ·	2a. Mailing Address						4. FEI Number	· · · · · · · · · · · · · · · · · · ·		plied For
21				26						65-0489169			t Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.						5. Certificate of Status Desired			Additional
22				27						6. Certificate of Status Desired	_	Fee Re	equired
City & State				City & State					ı	6. Election Campaign Financing		\$5.00	
Zip Country				Zip Cou			Country					Added	
24 Zip	25			29 30			Ounity			 This corporation owes or has paid Personal Property Tax due June 30 		· –	angible No
9. Name and Address of Current Registered Agent										10. Name and Address of New Regis			
GE	ISMAR, LA	NCE				1	31	Name					
2314 HAYES ST.						<u> </u>	82 Street Add			s (P.O. Box Number is Not Acceptable)			
HOLLYWOOD FL 33020										5 (1 .o. Box Hambor is Not Nocopiable)			
						[*	33						
							34	City			FL	85 Zip (Code
11. Pursuant	to the provis	ions of Section	ns 607.0502 a	nd 607.150	8, Ftorida Statu	es, the abo	ove-	named c	orpor	ation submits this statement for the pur n's board of directors. I hereby accept t	pose of c	hanging it	s registered
agent. Fa	registered ag im f <mark>am</mark> iliar w	ith, and accep	in the State of i of the obligation	is board of directors, I hereby accept t	ne appoi	numeni as	registered						
SIGNATURE	Signature types	for proted partie of	registered agent an	d lite if apple	able (NO)	F: Registered	Anen	I sionature re	nuired :	when reinstating)	DATE	······	
12.			FICERS AND D			13.			4	ADDITIONS/CHANGES TO OFFICER		DIRECTOR	IS IN 12
TITLE	D				DELETE	1.1 TITL	ŧ					Change	Addition
NAME		AR, LANCE		1.2			1.2 NAME						
STREET ADDRESS		AYES ST.		1.3 \$			1.3 STREET ADDRESS						
CITY-ST-ZIP	HOLLY	WOOD FL 3	3020			1.4 CITY	-51	ZIP					
TITLE					☐ DELETE	2.1 TITL					L	Change	☐ Addilion
NAME						2.2 NAM		1					
STREET ADDRESS							2.3 STREET ADDRESS						
CITY-ST-ZIP					DELETE	2. 4 CIT		- ZIP				Change	Addition
TITLE NAME					ottere	3.1 TITE 3.2 NAM						Change	☐ Addition
STREET ADDRESS							-	DORESS					
CITY-ST-ZIP						3.4. CIT		- 1					1
TITLE	-				DELETE	4.1 TITE		- 211				Change	Addition
NAME						4. 2 NAM							
STREET ADDRESS						4.3 STR		DDRESS					
CITY-ST-ZIP						4.4 CITY	-ST-	ZIP					
TITLE					DELETE	5.1 TITLI	<u> </u>	ļ				Change	Addition
NAME						5.2 NAM	E						
STREET ADDRESS						5.3 STRE	ET A	DDRESS					
CITY-ST-ZIP						5.4 City	-st-	ZIP					
TITLE					☐ DELET e	6.1 TITL	E					Change	Addition
NAME						6.2 NAM	E						
STREET ADDRESS						6.3 STRE	ET A	DORESS					
CITY-ST-ZIP	19 11 11			·	- 100	6.4 CITY	-ST-	ZIP		ation (40 D7/OV/). Florido Cartido I for			

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 I am an officer or director of the corporation or the receiver or true ee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change of or on an attachment with an address.