## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

	1996									
DOCU	MENT # P9400	0004482	1 (4)							
•	NER CONSTRUCTION, INC	· ·								
Principal Place of Business Moding Andreus						3 INNIVERSI ILE SENII RIBII BANI BANI BE		BEE 81881 1811	1380  119  <b>160</b>	
12465 CITAT		12465 CITA								
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						3. Date Incorporated or Qualified 06/10/1994	E.	4/25/199	•	
. Principal P	Place of Business	2a. Maiing Address			4. FEI Number	.,1,		Applied For		
		26			59-3252660			Not Applicable Additional		
Suite, Apt	#, etc.	Suite, Apt. #. etc.			5. Certificate of Status Desired			Required		
City & Stat	te	City & Sta	ifet			6. Election Campaign Financing			0 May Be	
J	Country	<b>28</b> Z <sub>1</sub> D		Country		Trust Fund Contribution  8. This corporation has liability for			d to Fees	
Ζφ ]	25	29	3	 30]		,	es <b>[A</b> ]No	ax under 5	193.032,	
<u> </u>	9. Name and Address of Curr		nt		r	10. Name and Address of New	Registered	legistered Agent		
				81	Name					
Boerner, Deborah L 12465 Citation RD				82	82 Street Address (P.O. Box Number is Not Acceptable)					
SPRING HILL FL 34610				83						
				84	City		FL	<b>85</b> Zı	p Code	
tamiliar w IGNATURE	with, and accept the obligations of, Se Tsight in treatic on behave wholes song			Response : Au	d Sap af Mê terante	යේ මේ අප ස්ත්රා මූ	DÁTĚ		· · · · · · · · · · · · · · · · ·	
2.		NO DIRECTORS		13.		ADDITIONS/CHANGES TO O				
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aani Indéli Addressi	BOERNER, DEBORAH L 12465 CITATION RD			1.2 NAME	ADDRESS					
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ių į		[]	DELFTE	2 1 TI*LF				☐ Change	☐ Addition	
Wt.				2.5 NAME						
1981 I ADDRESS 111-51-79				23 STREE 24 CITY - :	ADDRESS St. ZIP					
`tF			DELETE.	3 1 THILE				☐ Change	☐ Addition	
ARH				3.2 NAME						
PRELABORESS	-				* ACORESS					
15 S1 Z2 12€			DELETE	3 4 CITY - 4 1 THFLF	ST-ZIF			Change	Addition	
SM:				4.2 NAME						
KEEL ADOR; SS	:			4.3 STREE	1 ASSIGNESS					
(fy _51 - 26		rı:	DELETE	4.4 CILY -	S1 - 71F			Change	Addition	
rite Ann		L.J <sup>1</sup>	LILLTIE	5 1 THILE 5 2 NAME				C) Grigings	☐ Magniton	
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(14-51-7F				54 C-11	1					
T(F			DECETE	6 1 HILE		The same state of the same sta	-	☐ Change	Addition	
N495				6.2 NAME						

14. It is hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 trusted 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 Alabyrient with an articless.

6.3 STREET ADDRESS

6.4 CITY - ST - ZiP

SIGNATURE:

STREET ADDRESS.

AME OF SIGNING OFFICER OR DIRECTOR TO LUCIAL X PRESIDENT

813 996-6611