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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000058275 (6)

GIANNETTI CONTRACTING OF FLORIDA, INC.

Principal Place of Business

Mailing Address

FILED Apr 14 1998 8:00am Secretary of State



		4371 NW 19 AVE POMPANO BEACH FL 33064				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
	_					08/05/1994		
2. Principal Place of Business	2a	, Mailing Address				4. FEI Number	Applied For	
1	26					65-0510175	Not Applicable	
Suite, Apt. #, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	28	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country 25	29	Zip	Country 30			8. This corporation owes or has paid the curre Personal Property Tax due June 30.	ent year Intangible Yes No	
g. Name and Address of Currer	nt Regis	tered Agent				10. Name and Address of New Registered A	gent	
GIANNETTI, RICK				B1	Name			
4371 NW 19 AVE POMPANO BEACH FL 33064			ļ.	B2	2 Street Address (P.O. Box Number is Not Acceptable)			
			1	93				
			Ī	B4	City	FL	85 Zip Code	
 Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I em familiar with, and accept the oblig 	of Flori	da. Such change was at	uthorized	by '	the corporatio	ration submits this statement for the purpose of c n's board of directors. I hereby accept the appoi	changing its registered intment as registered	
SIGNATURE						when rejustating) DATE		
Signature, typod or printed narrie of registering age OFFICERS AN			Registered	Agen	t signature required	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	

DELETE 1.1 TITLE Change TITLE GIANNETTI, RICKY 1.2 NAME 4371 NW 19TH AVE STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEAHC FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ■ Addition Change 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME 63 STREET ADDRESS

14. Thereby 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 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 attachment with an address.

SIGNATURE: X

RICKY GIANNETTI, PRESIDENT 4/7/88