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 # P94000078028 (5)

COURTYARD CONSTRUCTION, INC.

Ρ	۲İI	noli	al	Place	of	Busi	ness

10280 N.W. 47TH ST. SUNRISE FL 33351 Mailing Address

10260 N.W. 47TH ST. SUNRISE FL 33351-78

FILED May 06 1997 8:00am Secretary of State



DUMMIDE FL 33331		SUMMISE PL 93331-7807			•					
						3. Date Incorporated or Qualified 10/24/1994		te of Las)7/199	t Report	
	ace of Business	2a. Mailing Address				4. FEI Number	· · · · · · · · ·		Applied For	
21		26				65-0535691		Not Applicable		
22 Suite, Apr.		Stille, Apt. #, etc.				5. Certificate of Status Desired		,	5 Additional Required	
Uity & State	e 	City & State				6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fer				
Zip	Country	Z _i p		ntry	,	8. This corporation has liability for it	ntangible	tax unde	r s. 199.032,	
24	25	29	30				Yes [
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Mailing Address 2. Fill Number 65-0535691 Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 2. City & State 2. Country 3. Trust Fund Contribution 3. This corporation has liability for			lstered A	gent						
				B1	Name					
	Principal Place of Business Suite, Apt. #, etc. City & State Zip		<u> </u>	82	Street Add	dress (P.O. Box Number is Not Acceptab	lo)			
FOR	RT LAUDERDALE FL 33316						· •			
				83						
•			-	84	City		FL	85 Z	ip Code	
SIGNATURE							the appo	ointment	as registered	
				· ng	an agriciore req			DIRECT	OBS IN 12	
				u E				Chang		
NAME	VITOLO, JOSEPH		12 NA	ME				,	, .	
STREET ADDRESS			1.3 \$1	HEET	ADDRESS					
CITY-ST-ZIP	SUNRISE FL 33351		1.4 011	1Y-8	it-ZIP					
TITLE		☐ DELETE	21711	LF				Chang	e 🔲 Addition	
NAME			2 2 NA	ME						
STREET ADDRESS			2 3 S1	REET	ADDRESS					
			·		ST - 71P					
		L_ DELETE						☐ Chang	ge 🔲 Addition	
			3.2 NA	ME						
			3 3 \$11	REET	ADDRESS					
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								Chang	je Addition	
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					ADDRESS					
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NAME			5.1 MA					UIRIN	je [_] Addition	
					ADDRESS					
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NAME		<u></u>	62 NA					e ondin	, La riddicion	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			6401							
V. 1 VI WI			■ 0 1 UN	11-0						

14. I do 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 Ad poration 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 1311 thin jed, or on an attachment with an address.