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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000090035 (4)

| FIRST FLORIDA CONSTRUCTION CORP. | | | | | |
|---|---|---------------------------------|---------------------------------|---|------------------------------------|
| | | | | | |
| Principal Place | e of Business | Mailing Address | | | ishe ishi saki salas kish sin 1841 |
| 2401 PGA BLV | D | 2401 PGA BLVD | | | |
| | | SUITE 155-C | 00410.0500 | | |
| PALM BEACH | GARDENS FL 33410 | PALM BEACH GARDENS FL | 33410-3506 | 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| | | | | 12/12/1994 | 11/21/1996 |
| <u>-</u> | lace of Business | 2a. Mailing Address | 24.2 | 4. FEI Number 65-0555357 | Applied For |
| Suite. Apt | # etc | 26 P.O. Sox Suite, Apt. #, etc. | | | Not Applicable \$8.75 Additional |
| 22 | | 27 WEST PALL | DOU FZ | 5. Certificate of Status Desired | Fee Required |
| City & State | 9 | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 | | Trust Fund Contribution | Added to Fees |
| Zip Em | Country | Zip | Country | 8. This corporation has liability for in | |
| 24 | D. Name and Address of Current | 29 3 540 L 30 | <u>S.A. ن</u> | 10. Name and Address of New Reg | Yes No |
| COLF IAMON III | | | | | stereo wgeni |
| OLE, DAMES E III | | | | ispay woldszi | |
| | ST PALM BEACH FL 33407 | | 82 Street Ac | idress (P.O. Box Number is Not Acceptable |) |
| 179.5 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | 83 | 52 Pr. 1205 | |
| | | | | 52 Panness La | |
| | | | 84 City | DLINGTON | FL 85 Zip Code |
| 11. Pursuant to the provisions of Sections 607(0502 find 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered | | | | | |
| 11. Pursuant to the provisions of Sections 607(1502 and 607, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the fight had submits a statement for the purpose of changing its registered agent. I am fainitiar with, and accept the objigations of Section 607.0505, florida Statutes. | | | | | |
| SIGNATURE | X/VVV | · Waynewil | | 75 | <u> </u> |
| 12. | Signature, Type the printed name of registered agent OFFICERS AND | | egistered Agent signature rea | quired when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE |
| I ILE | SD OFFICERS AND | DELETE | 1.1 TiTLE | ADDITIONS/CHANGES TO OFFICE | Change Addition |
| NAME | COLE, JAMES LA | = 1.1.1.1 | 1.2 NAME | | |
| STREET ADDRESS | 215 31ST STREET | | 1.3 STREET ADDRESS | | |
| CITY-S1-ZIP | WEST PALM BEACH FL 93407 | | 1.4 CITY-ST-ZIP | | \ |
| TITLE | PD | DELETE | 21 TITLE | | Change Addition |
| NAME | MICELLI, ANTHONY F | | 2.2 NAME | | į. |
| STREET ADDRESS | 6944 S. PALMETTO CIR. | | 2.3 STREET ADDRESS | | |
| DITY-ST-ZIP | BOCA RATON FL 33437 | | 2. 4 City-St-ZiP | | |
| THTLE | | ☐ DELETE | 3.1 TITLE | 5D | Change Addition |
| NAME (| | | 3.2 NAME | LO ICO PARTO CA | Mind Mind |
| STREET ADDRESS | | 1 | 3 3 STREET ADDRESS | WALLES F. 22 | 214 |
| CITY - \$1 - ZIF | | DELETE | 3.4. CITY - ST - ZIP | | Change Addition |
| TH'LE | | □1 nerese | 1 | | Change Changing |
| NAME STREET ADDRESS | | | 4. 2 NAME 4.3 STREET ADDRESS | | |
| CITY-ST-ZiP | | | 4.4 CITY+ST-ZIP | | |
| TITLE | | DELETE | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | and annex | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-S1-ZIP | | | 5.4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 6.1 TITLE | | Change Addition |
| NAM+ | | , | 6.2 NAME | | |
| STREET ADORESS | | | 6.3 STREET ADDRESS | | } |
| CHY-ST-ZIP | · | | 6.4 CITY-ST-ZIP | | |

SIGNATURE:

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 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, of on an arrangement with an address.

FILED

May 07 1997 8:00am

Secretary of State