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

Mailing Address

2272 AIRPORT RD S.

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

347 WIMBLEDON LN.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000091491 (8)

FLORIDA INTERLOCK BLOCK CO.

NAPLES FL 33942 SUITE 203 US NAPLES FL 34112-4837 US 3a. Date of Last Report 3. Date Incorporated or Qualified 12/16/1994 02/16/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 1495 YINTAGE 65-0540180 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be NAPLES FLORIDA Trust Fund Contribution Added to Fees 23 28 Country Zip This corporation has flability for intangible tax under s. 199.032. Yes X No Florida Statutes 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KAZITORIS, B. P 2272 AIRPORT ROAD S Street Address (P.O. Box Number is Not Acceptable) SUITE 203 NAPLES FL 33962 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607,0502 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 State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and their applicable (NOTE: Registered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE LESSARD, MARC NAME 1.2 NAME 347 WIMBLEDON LN. lygs vintage lane 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 33942 1.4 CITY - ST - ZIP CITY-S1-ZIP Change DELETE 21 TITLE Addition TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP City - St - ZIP DELETE Change Addition 3.1 TIŢĻĒ TITLE NAM: 3.2 NAME

64 CITY-ST-ZIP

14. If 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

3.3 STREET ADDRESS 3.4 CITY - ST-ZIP

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5 3 STREET ADDRESS

6.3 STREET ADDRESS

5 4 DITY - ST - ZIP

4.1 TITLE

4 2 NAME

5 1 TITLE

52 NAME

61 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY ST-Z05

NAME

CITY ST ZIP

CITY - ST - ZIP

TITLE

NAME

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NATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

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Change

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FILED

Jan 24 1997 8:00am

Secretary of State