ECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

OCUMENT

PAT DOLAND BACKHOE SERVICES, INC. rincipal Place of Business Mailing Address OI S.W. 39TH AVENUE 3601 S.W. 39TH AVENUE LLYWOOD FL 33023 HOLLYWOOD FL 33023

FILED Jul 12, 1999 8:00 am Secretary of State

07-12-1999 90008 016 ***550.00

1999 P95000022799 90008 - 16 - 30008 - 36 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/20/1995 Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0681502 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution dded to Fees Zip Country Zip Country 8. This corporation owes the current year \mathbf{X}_{No} Yes 29 30 Intangible Personal Property. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 DOLAND, PAT Street Address (P.O. Box Number is Not Acceptable) 3601 S.W. 39TH AVENUE HOLLYWOOD FL 33023 83 City Zip Code 85 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. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. SNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 1.1 TITLE DELETE Change DOLAND, PAT 12 NAME ET ADDRESS 3601 S.W. 39TH AVENUE 1.3 STREET ADDRESS HOLLYWOOD FL 33023 ST-ZIF 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change 2.2 NAME 2.3 STREET ADDRESS ET ADDRESS 2.4 CITY-ST-ZIP ST-ZIF 3 1 TITLE ___ DELETE Addition 3.2 NAME 3.3 STREET ADDRESS **ET ADDRESS** 3.4 CITY-ST-ZIP ST-ZIP 4.1 TITLE OELETE Change 4.2 NAME ET ADDRESS 4.3 STREET ADDRESS 3T-ZIP 4.4 CITY-ST-ZIP DELETE 51 TITLE Change Addition 5.2 NAME TADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition 6.2 NAME T ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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 dicated on this annual report or supplemental annual report is true and accurate that my signature shall have the same legal effect as if made under oath; that I am in officer or director of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered that my name appears of the corporation or the receiver or trustee empowered Block 12 or Block 13 if changed, or on an

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