

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

FILED  
Apr 16 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000027539 (2)

1. Corporation Name

FRG CONTRACTORS, INC.

Principal Place of Business

Mailing Address

1196 W NEWPORT CTR DR  
DEERFIELD BCH FL 33442  
US

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DEERFIELD BCH FL 33442  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 1197 W. Newport Center Dr.		25 1197 W. Newport Center Dr.		04/06/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0572919	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		Country	
24		29		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
LEIBY, LARRY R. LEIBY FERENCIK LIBANOFF & BRANDT 150 S PINE ISLAND ROAD, STE 400 PLANTATION FL 33324				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	STD	DELETE	1.1 TITLE	Gil Raphael	Change	Addition	
NAME	WINDLER, CYNTHIA A		1.2 NAME	2427 NW 62nd St.			
STREET ADDRESS	2551 ROCK ISLAND ROAD, #112		1.3 STREET ADDRESS	Boca Raton, FL			
CITY-ST-ZIP	MARGATE FL		1.4 CITY-ST-ZIP	33496			
TITLE	D	DELETE	2.1 TITLE	Earl Kachance	Change	Addition	
NAME	PIERSON, GLENN N		2.2 NAME	8866 Cottonwood Ln, North			
STREET ADDRESS	1080 NW 3 STREET		2.3 STREET ADDRESS	Maple Grove, MN			
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-ST-ZIP	55369			
TITLE	C	DELETE	3.1 TITLE	alan Mack	Change	Addition	
NAME	STYLES, PAUL L JR.		3.2 NAME	142 Valencia St.			
STREET ADDRESS	2681 BROOKWOOD DR, NE		3.3 STREET ADDRESS	Royal Palm Beach, FL			
CITY-ST-ZIP	ATLANTA GA		3.4 CITY-ST-ZIP				
TITLE	PD	DELETE	4.1 TITLE	Janis Martin	Change	Addition	
NAME	DAVIDSON, TOM		4.2 NAME	731 Cypress Lane - G			
STREET ADDRESS	663 HOLLOWES CIR		4.3 STREET ADDRESS	Tempe Beach, FL			
CITY-ST-ZIP	DEERFIELD BEACH FL		4.4 CITY-ST-ZIP	33064			
TITLE			5.1 TITLE		Change	Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE			6.1 TITLE		Change	Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

14. I 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, or on an attachment with an address.

SIGNATURE: Janis Martin 3-25-98 954-429-1411

CR2E034 (10/97)