## FILE NOW: FILING FEE AFTER MAY 1 18 \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P95000029307

SOUTHERN BREEZE CONTRACTORS, INC.

SIGNATURE: STEVE MARTIN, President

Principal Place of Business

Mailing Address

FILED
May 20 1998 8:00am
Secretary of State

850-837-0922

28 APR 98

	OUNTAIN DR, UNIT		P.O.BOX 576	
DESTI	IN FL 32541		DESTIN FL 3	3. Date Incorporated or Qualified 3a. Date of Last Report 3 APR 95 3JUL 97
2. Principal P	lace of Business	2a. Mailing Address		Applied For
21		26		51-350189   Not Applicable
Suite, Apt		Suite, Apt. #, etc		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for inlangible tax under s. 199.032,
24	9. Name and Address of Current	1 Popletored Agent	30	Florida Statutes Yes No  10. Name and Address of New Registered Agent
<del></del>	S. Name and Address of Current	r negistered Agent	81 Nam	
	MARTIN		<b>62</b> Stree	et Address (P.O. Box Number is Not Acceptable)
	OUNTAIN DRIVE, U	NIT A	83	
DESTI	IN FL 32541			
			84 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607 0502	2 and 607 1508. Florida \$	Statutes, the above-name	od corporation submits this statement or the purpose of changing its registered
effice or re agent la	egistered agent, or both, in the State i m familiar with, and accept the obliga	of Florida. Such change tions of Section 607.050	was authorf eo by the ec i5. Florica Slavites.	progration's board of directors. I hereby accept the appointment as registered
•	STEVE MARTIN, Pr		CAN	28 APR 98
SIGNATURE	Signature, typed or printed name of registered agen	of most title of applicable	(NOTI Rog stered Agent signatu	re required what reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		L_J DELET	E 117/ILE	P Change Addition  STEVE MARTIN  305 MOUNTAIN DR, UNIT A  DESTIN FL 32540  Change Addition
NAME			1.2 NAMÉ	STEVE MARTIN
STREET ADDRESS			1.3 STREET ADDRESS	305 MOUNTAIN DR, UNIT A
CITY-ST-ZIP		DELET	1.4 CITY-ST-ZIP E 2.1 TITLE	DESTIN FL 32540.
TITLE		الما الما	2.2 NAME	5
STREET ADDRESS			2.3 STREET ADORESS	RICK WILSON
CITY-ST-ZIP			2. 4 CITY - 51 - ZIP	305 MOUNTAIN DRIVE, UNIT A
TITLE		DELET		DESTIN FL 32540 Change Addition
NAME			3 2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	;
CITY-ST-ZIP			34 CITY-ST-ZIP	
TOTLE		DELET		Change Addition
NAME			4 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4.C(1)Y - \$1 - 7(P	
TITLE		☐ DELET		☐ Change ☐ Addition
NAME			5.2 NAME	900002533929 🗸 🖊
STREET ADDRESS			5.3 STREET ADDRESS	·   -05/22/9801104012
CITY - ST - ZIP		DELET	5 4 CITY-ST- ZIP	***165_00
TITLE		L DELET		Change Addition'
NAME CTREET ADORESE			6.2 NAME	90,00,025,33,92,9
STREET ADDRESS			63 STREET ADDRESS	-05/22/9801104011 ***8-75
14. I do heret	ov certify that the information supplied	with this filing does not	6.4 City-S1-ZiP qualify for the exemption	Slated in Section 119-97(3)(i), Elorida Statutes. I further certify that the
informatio	in indicated on this annual report or sufficer or director of the corporation or	upplemental annua' repo	rt is true and accurate ar	slated in Section 119 7(3)(i), Florida Statutes. I further certify that the had that my signature field have the same legal effect as if made under oath; that report as ready Chapter 607, Florida Statutes; and that my name
appears in	n Block 12 or Block 13 if changed, or	on an altachment with a	n actifess.	of the region of