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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000029386 (6)

VASCO BUILDERS, INC.

FILED May 07 1998 8:00am Secretary of State



Principal Place	a of Business	Mailing Address			
16204 N. NEB	raska ave Suite C	16204 N. NEBRASKA	16204 N. NEBRASKA AVE., SUITE C		
LUTZ FL 33549		LUTZ FL 33549			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					04/14/1995
9 Principal P	ace of Business	2a. Mailing Address			4. FEI Number Applied For
	lace of Business	<u> </u>	, Maning Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			¢0.75 Additional
22		27			5. Certificate of Status Desired Fee Regulred
City & State		City & State			
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Country Z _(p) Co		ntrv	This corporation owes or has paid the current year Intangible
24	25	29	30	,	Personal Property Tax due June 30. Yes \(\subseteq \text{No} \)
[24]	9. Name and Address of Curre		1901		10. Name and Address of New Registered Agent
VAI				81 Name	
VAN BEBBER, ROBERT W					
912 BRIDGETT LANE				B2 Street	Address (P.O. Box Number is Not Acceptable)
LUI	TZ FL 33549		-	83	
}				ا ا	
}				B4 City	85 Zip Code
					FL 63 25 COO
11. Pursuant office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Sta	502 and 607.1508, Florida St te of Horida. Such change w	atutes, the ab as authorized	ove-named by the con	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505	, Florida Statu	ites.	, , , , , ,
SIGNATURE					
	Signature, typed or printed name of registered a			Agent signature	required when reinstelling) DATE
12.		ND DIRECTORS DELETE	13. 1.1 UI		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	PD				Colonge Colonium
NAME	VAN BEBBER, WILLIAM H II		1.2 NA		
STREET ADDRESS 15123 LAKE MAGDALENE BLY		SLVD.	1.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33618	Diver		Y - \$1 - ZIP	
TITLE	1 15		2.1 Tiff		Change Addition
NAME :	VAN BEBBER, ROBERT W		2.2 NA	ИF	
STREET ADDRESS	↓		2.3 STREET ADDRESS		u^ - ∮ _M .
CITY-ST-ZIP	LUTZ FL 33549			Y - ST - ZIP	
TITLE	S D	☐ DELEŤE	3.1 1(1)	.E	☐ Change ☐ Addition
NAME	van Bebber, Joan		3.2 NA	N E	
STREET ADDRESS	301 DE BUEL ROAD		3.3 STF	EF1 ADDRESS	
CITY-ST-ZIP	LUTZ FL		3.4. CI	Y-ST-ZIP	
TITLE		☐ DELETE	4.1 T(T)	.F	Change Addition
NAME			4. 2 NA	ME	
STREET ADDRESS			4.3 \$1F	EE1 ADDRESS	
C(TY-ST-ZIP			4.4 CIT	Y-ST-ZIP	
TITLE		DELETE	5.1 TIT	-	Change Addition
NAME			5.2 NA	Æ	
STREET ADDRESS			5.3.STF	EE1 ADORESS	
CITY-ST-ZIP				Y-S1-ZIP	
TITLE		DELETE	6.1 TIT		Change Addition
NAME		المادة المادة	6.2 NAI		
i I					
STREET ADORESS				EE1 ADORESS	
CITY-ST-ZIP			6 4 CIT	Y-ST-ZIP	

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 or an attachment with an address.