SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000031329 (2)

PASQUALE CONSTRUCTION, INC.

FILED Aug 12 1998 8:00am Secretary of State



Principal Plac	e of Bus iness	Mailing Address			// THE STATE OF TH	
714 NW 38TH AVE				ļ		
				DO NOT WRITE IN THIS SPACE		
US		U\$		3. Date Incorporated or Qualified	110 GI AGE	
			.	04/21/1995		
2. Principal F	Place of Business Araunte (mr.	2a. Mailing Address Pay	mule Porst	4. FEI Number	Applied For	
20 07/6 (1 12/4/R) [70] 07/6 \ 0 1/			dia D	65-0575683	Not Applicable	
Suite, Apt.	#, etc.	Softe, Apl. #, etc.	wy che is a		\$8.75 Additional	
22 Delsay Bal Al 27 (2) branket				5. Certificate of Status Desired	Fee Required	
City & State City & State				6. Election Campaign Financing	\$5.00 May Be	
23 111 28 711				Trust Fund Contribution	Added to Fees	
Zip Country / Zip Coyn				8. This corporation owes or has paid the	current year intangible	
24] 33	446 25 /alm 1941 2	9 3344 6 3	· Palm 19ch	Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Current Re	gistered Agent		10. Name and Address of New Registers	ed Agent	
PASQUALE, ANTHONY F						
ADOM ALMI ATTI COURT				82 Street Address (P.O. Box Number is Not Acceptable)		
			83			
			84 City		- 85 Zip Code	
			84 City	F	B5 Zip Code	
office or	registered agent, or both, In the State of Fi am familiar with, and accept the obligations	lorida. Such change was aut s of, section 607.0505, Florid	horized by the corporat la Statutes.	oration submits this statement for the purpose of ion's board of directors. I hereby accept the ap	pointment as registered	
	Signature, typed or printed name of registered agent and t		: Registered Agent signature req			
12.	OFFICERS AND DI		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE		Change Addition	
NAME	PASQUALE, ANTHONY F		1.2 NAME		Ł	
STREET ADDRESS			1.3 STREET ADORESS		÷	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		1.4 CITY-ST-ZIP			
TITLE	PASQUALE, ANTHONY 8715 SHW PINE RD DELRAY BOH, I'L 3	F DELETE	2.1 TITLE		Change Addition	
NAME	PASQUALE, MALLE		2.2 NAME		4.	
STREET ADORESS	8715 SHW PINE KV		2.3 STREET ADDRESS			
CITY-ST-ZIP	DELRAY BCH, IL 3	3:146 <u>-9544</u>	2.4 CITY-ST-ZIP			
TITLE	, ,	DELETE	3.1 TITLE		Change Addition	
NAME		•	3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE	Į.	DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	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.