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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000034693 (8)

CERTIFIED BUILDING CORP.

Principal Place of Business Mailing Address P.O. BOX 360634 251 COCONUT DR. INDIALANTIC FL 32903 MELBOURNE FL 32936-0634 3. Date incorporated or Qualified 3a. Date of Last Report 05/01/1995 01/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3313073 21 NONTH COUNT 26 Not Applicable Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be ENDIALANTIC Trust Fund Contribution 28 Added to Fees Country ntangible tax under s. 199.032, 8. This corporation has liability for Florida Statutes Yes No.

Name and Address of New Registered Agent 29 30 9. Name and Address of Current Registered Agent 81 PARKER, JEFF PANKEN 251 COCONUT DR. Street Address (P.O. Box Number is Not Acceptable) 82 INDIALANTIC FL 32903 NONTH COUNT 83 84 Zip Code 32903 CLOIALANDO 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. PANKER pront of native of organizated agents and little in sypplic SIGNATURE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. TiTLE DELETE Change Addition 11 TITLE PARKER, JEFF NAME 1.2 NAME 251 COCONUT DRIVE 21 NONTH COUNT STREET ADDRESS 13 STREET ADDRESS INDIALANTIC FL 32003 14 CITY - ST - ZIP City-St-ZiE Change TITLE DELETE 21 TITLE Addition NAM 22 NAM STREET ADORESS 2.3 STREET ADDRESS CUTY-ST-705 2 4 City - St - ZiP DELETE TITLE 3 1 TITLE Change Addition NAME 3.2 NAM : STREET ADDRESS 3.3 STREET ADDRESS CITY - \$1 - 7/P 3 4. CITY - \$1 - ZIP DELETE TITLE 4 1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 City - ST-ZIP 1 DELETE THE 5.1 TITLE Change Addition NAME 5.2 NAM STREET ADDRESS 5.3 STREET ADDRESS CITY ST-79 5.4 City - ST - ZIP

SIGNATURE:

appears in Block 12 or Block 13 it of

TILE

NAME

STREET ADDRESS.

CITY - ST - ZiP

anged, or on an attachment with an address.

DELETE

6 1 THLE

6.2 NAM

6.3 STREET ADDRESS

€ 4 CITY - S1 - ZIP 14. I do 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

Addition

**FILED** 

Jan 14 1997 8:00am

Secretary of State