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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT

P95000043720 (8)

BEEMIK BUILDERS & CONSTRUCTORS, INC.

Principal Place of Business
1637 HAMILTON STREET
IACKEUNINITE EL 22210

CITY-ST-ZIP

Block 12 or Block 13 if change

SIGNATURE:

Mailing Address

1637 HAMILTON STREET JACKSONVILLE FL 32210

FILED Feb 06 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

that my name an

1-23-98

3. Date Incorporated or Qualified 06/06/1995

Principal Place of Business Mailing Address 4. FEI Number Applied For SAME SAME 59-3318439 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible X Yes 29 30 Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BAKER, DANIEL E SAME **4820 PRINCESS ANNE LANE** 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32210 83 Zip Code 11. Pursuant to the provision Forlda Statutes, the above-named corporation submits this statement for the purpose of changing its registered change was authorized by the corporation's board of directors. I hereby accept the appointment as registered 607.0505, Florida Statutes. SIGNATURE (NOTE, Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition BAKER, DANIEL E NAME 1.2 NAME CR2E034 4820 PRINCESS ANNE LANE STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 1.4 CITY - ST- ZIP CITY - ST - ZIP DELETE 2.1 TITLE Change Addition TITLE BAKER, BEVERLY E NAME 2.2 NAME **4820 PRINCESS ANNE LANE** 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I hereby certify that the information applied 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 expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

DANIEL E. BAKER