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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000044807 (2)

## FILED Feb 13 1998 8:00am Secretary of State

Principal Place	OT BUILDERS, INC. De of Business /E.	Mailing Add	AVE.						
8T. PETE BEACH FL 33706 ST. PETE BEACH FL 33706 US						DO NOT WRITE IN THIS SPACE			
90						3. Date Incorporated or Qualified			
						06/02/1995			
2. Principal Place of Business 2a, Mailing Address						4, FEI Number		I A	pplied For
21		26			59-3321019			ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75	Additional	
22		27				5. Certificate of Status Desired	<u></u>	Fee R	equired
City & Stal	te	City & St	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28	······································			Trust Fund Contribution		Added	to Fees
Zip	· — ·		Zip Cou		У	8. This corporation owes or has paid the current year Intangible			
24			30			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent			
	g, Name and Address of Curre	ent Registered Age	ent	81	Name	10. Name and Address of New H	legistered A	gent	
	RANDT, MICHAEL F			["	ivaine				
420 55TH AVE.				82	Street A	ddress (P.O. Box Number is Not Accepta	able)		
ST. PETE BEACH FL 33706				83					
				**	'				
				84	City		FL	<b>85</b> Zip	Code
D	1. 16	00 1 007 4500	Fig. de Casa			corporation submits this statement for the bration's board of directors. I hereby according			4
agent. I a SIGNATURE 12.	am familiar with, and accept the obligation of t	gations of, Section	607.0505, Fl	orida Statute	S.	rquired when reinstating) ADDITIONS/CHANGES TO OFF	DATE	·	
TITLE	D		DELETE	1.1 TITLE				Change	Addition
NAME	BRANDT, MICHAEL F			1.2 NAME	-				
STREET ADDRESS	420 55TH AVE.			1.3 STREE	T ADDRESS				
CITY-ST-ZIP	ST. PETE BEACH FL 33706			1,4 C/TY - 1	ST-ZIP				
TITLE			DELETE	2,1 TITLE				Change	Addition
NAME				2.2 NAME					
STREET ADDRESS				2.3 STREE	T ADDRESS				
City-St-Zip				2. 4 CITY-	ST-ZIP	· · · · · · · · · · · · · · · · · · ·		,	
TITLE			DELETE	3.1 NTL€	Ţ			Change	Addition
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREE	T ADDRESS				
CITY-ST-ZIP		·····	7505*5	3.4. CITY-	ST-ZIP				
TITLE		L	DELETE	4.1 TITLE	1		l	Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS					I ADDRESS				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	Toriere	4.4 C(1) Y - 5	ST-ZIP	<del></del>		7 Character	A address
TITLE		L_	DEFELE	5.1 TITLE	- 1		L	Change	
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET					
CITY-ST-ZIP			I DC/ ETC	5.4 CITY-5	ST-ZIP			T Character	A desired
TITLE		L	DELETE	6.1 TITLE	ļ		L	☐ Change	Addition
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET					
CITY-ST-2HP 1				RAICITY, G	21 - 710				

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 roceiver 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.

SIGNATURE.

Bruff Hike Board

2-10-65

3/7 ----