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**May 01 1998 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1998**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000053479 (8)

1. Corporation Name
PAZ BUILDERS INC.



Principal Place of Business
**1252 CABANA RD #3
SINGER ISLAND FL 33404**

Mailing Address
**1252 CABANA RD #3
SINGER ISLAND FL 33404**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/06/1995	
21	8451 S.E. QUAIL RIDGE	26	WAY 8451 S.E. QUAIL	4. FEI Number 65-0591861	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27	RIDGE WAY	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23	HOBE SOUND, FL.	28	HOBE SOUND, FL.		
24	Zip 33455 Country MARTIN	29	Zip 33455 Country MARTIN		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ZECCA, PETER A 1252 CABANA RD #3 SINGER ISLAND FL 33404				81	Name ZECCA, PETER A.		
				82	Street Address (P.O. Box Number is Not Acceptable) 8451 S.E. QUAIL RIDGE WAY		
				83			
				84	City HOBE SOUND	85	Zip Code 33455

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.

SIGNATURE **PETER A. ZECCA, DPVST** DATE **APRIL 20, 1998**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVST	1.1 TITLE	PVST
NAME	ZECCA, PETER A	1.2 NAME	ZECCA, PETER A.
STREET ADDRESS	1252 CABANA RD #3	1.3 STREET ADDRESS	8451 S.E. QUAIL RIDGE WAY
CITY-ST-ZIP	SINGER ISLAND FL	1.4 CITY-ST-ZIP	HOBE SOUND, FL. 33455
TITLE	D	2.1 TITLE	D
NAME	ZECCA, PETER A	2.2 NAME	ZECCA, PETER A.
STREET ADDRESS	1252 CABANA RD #3	2.3 STREET ADDRESS	8451 S.E. QUAIL RIDGE WAY
CITY-ST-ZIP	SINGER ISLAND FL	2.4 CITY-ST-ZIP	HOBE SOUND, FL. 33455
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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.

SIGNATURE **PETER A. ZECCA** **44-20-98 (S11) 546-2686**

CR2E034 (1097)