FILED Feb 26, 1999 8:00 am

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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

ANNL	JAL REPORT	Secretary o	f State	Secretary of State
	1999	DIVISION OF CO	RPORATIONS	02-26-1999 90018 016 ***150.00
	MENT # P95000	074961		
	NSTRUCTION, INC.			
1101 00	nomeonen, me			
Principal Place	e of Business	Mailing Address		1 1061061 tre 10101 Bills Bills abitt abitt abitt nest atala tare and 1101 tab
13647 2ND AVE	NE	13647 2ND AVE NE		
MILL CREEK BRADENTON FL	24202	MILL CREEK Bradenton FL 34202		DO NOT WRITE IN THIS SPACE
US .	. 34202	US		3. Date incorporated or Qualifed
				09/26/1995
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-0624245 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Fee Required
City & Stat		City & State		6. Election Campaign Financing \$5.00 May Be
City & Stat	e	28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29 30		Personal Property Tax.
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Registered Agent
B1				HOU WAYNE D
HOY, WAYNE D			82 Street	et Address (P.C. Box Number is Not Acceptable)
6412 FOX HUNT LANE Bradenton Fl 34202			83	13647 2ND AUE NE
DRADENTON LE 34202				:
			84 City	hoaner) + FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the above-named	d corporation submits this statement for the ournose of changing its registered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was author	orized by the corp	poration's board of directors. I hereby accept the appointment as registered
•	in laminal with, and accept the obliga	mons of coolen out over the		
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Re-		e required when reinstating) OATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Maddition
TITLE	ST	☐ DEFE IE	1.1 TITLE	Theology N. Hoy
NAME	HOY, RYAN M		1.2 NAME 1.3 STREET ADDRESS	WAYNE D. HONDE DE
STREET ADDRESS	13647 2ND AVE NE BRADENTON FL 34202		1.4 CITY-ST-ZIP	BLADENTON FI 34202
CITY-ST-ZIP TITLE	BRADENTON PL 34202	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	s
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	S
CITY-ST-ZIP		☐ DELETÉ	3.4. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		□ petric	4.1 TITLE 4. 2 NAME	
NAME STDEET ADDRESS			4.3 STREET ADDRESS	s
STREET ADDRESS CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			52 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	s
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Change Children
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	N
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 all address, with all other like empowered.

SIGNATURE: