AMENDED

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

FILED
Jun 29 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 # P95000077545 B

1. Corporation Name
Akers & Associates Construction, Inc.

Principal Place of Business / Mailing Address

No Change

Amend

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21
Suite, Apt #, etc
22
City & State
23
Zip 24 | Country 25

2a. Mailing Address
26 4607 N. 56th Street
Suite, Apt #, etc 27
City & State 28 Tampa, Florida
Zip 29 33610 | Country 30 Hillsborough

3. Date Incorporated or Qualified

4. FEI Number 59-3345786 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

Akers, Dean
474 Lucerne Avenue
Tampa, Florida 33606

10. Name and Address of New Registered Agent

81 Name: Janell Moore
82 Street Address (P.O. Box Number is Not Acceptable): 4607 N. 56th Street
83
84 City: Tampa FL 85 Zip Code: 33610

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 [signature] Janell Moore 6/22/98
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	S	☒ DELETE	1.1 TITLE	P	☒ Change ☐ Addition
NAME	Akers, Debbie		1.2 NAME	Akers, Dean	
STREET ADDRESS	474 Lucerne Avenue		1.3 STREET ADDRESS	4607 N. 56th Street	
CITY-ST-ZIP	Tampa, Florida 33606		1.4 CITY-ST-ZIP	Tampa, Florida 33610	
TITLE		☐ DELETE	2.1 TITLE	V	☐ Change ☒ Addition
NAME			2.2 NAME	Gamm, Steve	
STREET ADDRESS			2.3 STREET ADDRESS	4607 N. 56th Street	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	Tampa, Florida 33610	
TITLE		☐ DELETE	3.1 TITLE	T	☐ Change ☒ Addition
NAME			3.2 NAME	Miranda, Gene	
STREET ADDRESS			3.3 STREET ADDRESS	4607 N. 56th Street	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	Tampa, Florida 33610	
TITLE		☐ DELETE	4.1 TITLE	S	☐ Change ☒ Addition
NAME			4.2 NAME	Moore, Janell	
STREET ADDRESS			4.3 STREET ADDRESS	4607 N. 56th Street	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Tampa, Florida 33610	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	300002574587	
STREET ADDRESS			6.3 STREET ADDRESS	-06/29/98--01073--024	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	****61.25	

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 report or supplemental 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: [signature] Dean Akers 813-623-2827
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)