PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Jun 25, 1999 8:00 am Secretary of State

· Corporation	MENT # P960000 CONSTRUCTION, INC.	019040		06-25-1999 90009	018 ***55	0.00
Principal Place	e of Business	Mailing Address		1 1881/581 110 18118 8111 3911 4911 4911 4811 4811	E, 11016 10111 401	616
385 ECHO CIR.		P.O. BOX 898	0540			
FORT WALTON	BEACH FL 32548	FORT WALTON BEACH FL 32	:343	DO NOT WRITE IN TH	IS SPACE	
				3. Date Incorporated or Qualifed		
				02/26/1996		
	lace of Business	2a. Mailing Address	.17	4. FEI Number		Applied For Not Applicab
21 19 W(Suite, Apt.	godland Bayou Dr.	26 P. O. Box 3 Suite, Apt. #, etc.	011	59-3363773		Additional
22	#, etc.	27		5. Certifcate of Status Desired		Required
City & State	θ	City & State		6. Election Campaign Financing	\$5.0	0 мау Ве
23 Sant	a Rosa Beach FL	28 Santa Posa	Beach FL	Trust Fund Contribution		d to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year I		
24 524	159 25 Walton	29 32454 3	Walton	Personal Property Tax.	∐ Yes	₩No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registere	u Agent	
385	DRY, STEPHEN D ECHO CIR. IT WALTON BEACH FL 32548		82 Street Add	ress (P.O. Box Number is Not Acceptable)	. 85 Zij	o Code
			- 1 Sánta	aRosa Beach F	レーコ	2459
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was auti	norized by the corporati	poration submits this statement for the purpose on's board of directors. I hereby accept the app	omuniem as	ts registered registered
SIGNATURE	YEAR STANKS	tephen D. Landry-	president			
	Stephen D. Landry S	tephen D. Landry— and the if applicable. (NOTE: RI D DIRECTORS	president	6 - 24 - ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	tephen D, Landry— and title if applicable. (NOTE: Ri	president egistered Agent signature require 13. 1.1 TITLE	ed when reinstating)		
SIGNATURE	Signature, typed or printed name of registered agent of printed name of registered agent of the printed agent of t	tephen D. Landry— and the if applicable. (NOTE: RI D DIRECTORS	President agistored Agent signature require 13. 1.1 TITLE 1.2 NAME	ed when reinstating)	AND DIRECT	
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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 eddress, with all other like empowered.

SIGNATURE:

6-24-99 850-863-9525

Date Daytime Phone #