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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P96000021548 (8)

PHOFNIX GENERAL CONSTRUCTION CORP.

Principal Place of Business				Mailing Address					. (1881/108) (18 18/18 81/18 ARILL OBLIL OBLIL BRILL OLICE 1180) TIED) SLIFF BIODY IDN 1881		
17900 S.W. 232 ST.				17900 S.W. 232 ST.							
MIAMI FL 33170				MIAMI FL 33170 US					DO NOT WRITE IN THIS SPACE		
US				US					3. Date Incorporated or Qualified	\neg	
									03/06/1996	-	
2. Principal f	Place of Busi	ness	28	Mailing Address					4. FEI Number Applied For	\dashv	
21				26					65-0641747 Not Applicable	Į.	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					60 75 4488	┧	
22				27					5. Certificate of Status Desired Fee Required	1	
City & State				City & State					6. Election Campaign Financing \$5.00 May Be	╛	
23				28					Trust Fund Contribution Added to Fees	1	
Zip Country				Zip Country			,	f-	8. This corporation owes or has paid the current year intangible	٦	
24	25			29 30				_	Personal Property Tax due June 30. Yes No		
	9. Name	and Address	of Current Regis	tered Agent					10. Name and Address of New Registered Agent]	
0:	STL, GLEN					81	Name)			
17900 S.W. 232 ST.							Street	Addre	ess (P.O. Box Number is Not Acceptable)		
MIAMI FL 33170											
						B4	City		FL 85 Zip Code	1	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the aboffice or registered agent, or both, in the State of Florida. Such change was authorized agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statu								d corpo rporatio	oration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered	7	
SIGNATURE						· · ·				1	
12.	Signature, types		registered agent and tille CERS AND DIREC		OTE: Registers	Ad Age	int signatur	e required	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	- ∮	
TITLE	D		CENS AND BINES	DELETE	1,1 1	ITI F		T	Change Addition	<u>, 13</u>	
NAME	OSTL,	GI EN			1.2 1						
	STREET ADDRESS 17900 S.W. 232 ST.			1.3 STREET ADDRE			ADDRESS	ł	•	[8	
	Y-ST-ZIP MIAMI FL			1.4 CITY				ļ	•	5	
TITLE	D	<u> </u>		DELETE	2,1 7		1-716	1	☐ Change ☐ Addition	ᆉ	
NAME	_	ROBERTA		-	2.2 N			ļ			
STREET ADDRESS		S.W. 232 ST.					ADDRESS			ı	
CITY-ST-ZIP	MIAMI				1		ST-ZIP	j		1	
TITLE				DELETE	3.1 T		,, <u>L.,</u>		Change Addition	╗	
NAME				-	3.2 N	AME		1	_ · _		
STREET ADDRESS				3.3 STREET AD			ADDRESS	1		1	
CITY-ST-ZIP							T-ZIP				
TITLE				DELETE	4.1 T	_		1	Change Addition	1	
NAME					4.21	AME					
STREET ADDRESS					4.3 S	TREET	ADDRESS	ĺ		1	
CITY-ST-ZIP						ITY-S				ļ	
TITLE				☐ DELETE	5.1 Ti			1	Change Addition	1	
NAME					5.2 N	AME				}	
STREET ADDRESS					5.3 S	TREET	ADDRESS	1			
CITY-ST-ZIP						ITY-S					
TITLE			,	DELETE	6.1 T				☐ Change ☐ Addition	7	
NAME					6.2 N	AME					
STREET ADDRESS	1				6.3 S	TREET	ADDRESS	1			
CITY-ST-ZIP						ITY-S					

14. Thereby certify that the information supplied with this filling 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 of an atyachment with producers.

CICALATUDE.

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0/1/193 (315)245-1159

FILED

Feb 23 1998 8:00am

Secretary of State