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

PROFIT CORPORATION ANNUAL REPORT

1999



ELORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000021548

PHOENIX GENERAL CONSTRUCTION CORP.

Principal Place of Busin					
17900 S.W. 232 ST. MIAMI FL 33170 US					
MIAMI FL 33170 US					

Mailing Address

17900 S.W. 232 ST.

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90291 032 ***150.00



MIAMI FL 33170 US	US US		DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualifed	
			03/06/1996	
2. Principa Place of Business	2a. Mailing Address		4. FEI Number	App ied For
1164208 RANGER RO	l. 26 64208 KAN	442 Rd.	65-0641747	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	/	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 13 MONTROSE COLORAL	City & State 28 Contrasse Col	iando	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 8/40/ 25 MONTRO	Zip	Country MONTROSE	This corporation owes the current year Personal Property Tax.	☐ YesZŃo
9. Name and Address of 0	Current Registered Agent		10. Name and Address of Man Registere	Agent
OSTL, GLEN 17900 S.W. 232 ST. MIAMI FL 33170		285	ess (P.O. Box Number is Not Acceptable)	
MIMMI FL 33170			TE #204	ne Zin Cydo
		84 City A	<i>m</i> / F	L 85 Zip Code 33/49
 Pursuant to the provisions of Sections 60 office or registered agent, or bo h, in the agent Lam familiar with and accept the 	State of Florida. Such change was auth	orized by the corporation	oration submits this statement for the purpose on's board of cirectors. I hereby accept the app	or changing its registered

SIGNATURE Stonature, typed or printed na ne of registered agent and title if applicable. (NOT : Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	D DELETE	1,1 TITLE	☐ Change ☐ Addition				
NAME	OSTL, GLEN	1.2 NAME	GLEN 05TL 285 N.W. 1995T				
STREET ADDRESS	17900 S.W. 232 ST.	1.3 STREET ADDRESS	281 N.W. 77737				
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	SUITE 204 MIAMI 33169				
TITLE	D □ DELETE	2.1 TITLE	Change Addition				
NAME	OSTL, ROBERTA	2.2 NAME	Roberta OSTL Change Addition				
STREET ADDRESS	17900 S.W. 232 ST.	2.3 STREET ADDRESS	285 N.W 1995				
CITY-ST-ZIP	MIAMI FL	2. 4 CITY-ST-ZIP	SUITE 201 MIAMI FC 33169				
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition				
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS					
CITY-ST-ZIP		34. CITY-ST-ZIP					
TITLE	☐ DELETE	4 1 TITLE	☐ Change ☐ Addition				
NAME		4. 2 NAME					
STREET ADDRESS		4 3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY-ST-ZIP					
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					
STREET ADDRESS		6.3 STREET ADDRESS					
CITY-ST-ZIP	The state of the s	6.4 CITY-ST-ZIP	d b. Continue 440 07/(2)/(i) Elevide Statutes 1 further codify that the information				

14. I heretly certify that the informalion 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 attact ment with an address, with all other like empowered.

SIGNATURE:

ICE ? OR DIRECTOR