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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of Stale
DIVISION OF CORPORATIONS

DOCUMENT #

196000023912

ALL PRO CONSTRUCTION & REMODELING, INC.

FILED
Mar 26 1998 8:00am
Secretary of State

•						
Principal Place of Business Mailing Address						
211 Key West Ct. P.O. Box 1898						
Casselberry, Fla.		ldenrod, Florida		DO NOT WRITE IN THIS SPACE		
32707	32733-1898			3. Date Incorporated or Qualified March 13, 1996		
55.5.						
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	A	pplied For
21 211 Key West Ct. 26 P.O. Box 1				59-3370164	N	lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
22	27			3. Certificate of otatos beside	Fee R	Required
City & State	City & State			6. Election Campaign Financing		May Be
23 Casselberry, Fla.	28 Goldenrod, Fla.			Trust Fund Contribution		to Fees
Žip Country	Ζφ	Country		8. This corporation owes or has paid the curr	_	
24 32707 25 Seminole		30 Se	minole	Personal Property Tax due June 30. L 10. Name and Address of New Registered A		□ No
9. Name and Address of Current	Hegistered Agent	81	Name	To. Name and Address of New Registered	-tgent	
			TVG//IC			
				ss (P.O. Box Number is Not Acceptable)		
Brenda Broadway						
211 Key West Ct.						
Casselberry, Fla	, 32707	84	City	FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607 0502	and 607.1508, Florida Statutes	s, the abov	e-named corpo	oration submits this statement for the purpose of	changing i	its registered
office or registered agent, or both in the State c agent. I am familiar with, and accept the obligat	f Flor da. Such change was au	ithorized by	/ the corporatio	on's board of directors. I hereby accept the appo	ointment as	registered
SIGNATURE Signature: Typed or proded name of registered agree	and tribuit secolo et do (NOTE	Registered An	nnt signature require:	d when reinstating) DATE	~	
12. OF FICERS AND		13.	and a gradule redoner	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
YITLE	☐ DELETE	1 1 TITLE		☐ Change		
President		1.2 NAME	Ì			
crosser ADDRESS Brenda Broadway			ADDRESS			
Curv et lib 211 Key West Ct.		1.4 CITY - S	ST · ŽIP			
Casselberry, Fla.	. 3270 DELETE	2.1 TITLE			Change	Addition
NAME	223		1			i
STREET ADDRESS			ADDRESS			
CITY-ST-ZIP		2. 4 CITY-	ST-ZIP			ĺ
TITLE	☐ DELETE	3 1 111LE			☐ Change	☐ Addition
NAME		3 2 NAME				İ
STREET AODRESS		3 3 S1REC1	ADDRESS			[
CITY-ST-2IP		3 4. CITY -	ST-ZIP			
TITLE	☐ DELETE	41 TITLE			☐ Change	☐ Addition
NAME		4 2 NAME				
STREET ADDRESS		4.3 STREET	ADDRES\$]
CITY-ST-ZIP		4.4 CITY - S	IT - ZIP		_	
TITLE	☐ DELETE	5 1 TITLE				☐ Addition
NAME		5.2 NAME			f.	S
STREET ADDRESS		5 3 STR[1	ADDRESS		/3	5.22
City-S1-ZiP		5 4 CITY - 9	ST-ZIP		_	- 1
TITLE	☐ DELETE			6000024698	BI 1 III	☐ Addition
NAME				600002459804 □ Addillor -03/27/9801002004 ***150.00		
STREET ADDRESS		6.3 STREET	ADDRESS	***150.00		
CITY - ST - 7(P		6.4 CHY - S	ST-ZIP			1
14. I hereby certify that the information supplied wit	ithis filing does not qualify for	the exemp	tion stated in S	Section 119.07(3)(i), Florida Statutes. I further ce	rtify that the	e information

4. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. Flurther certify that the information indicated on this annual report or suppliemental 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 this corporation or the receiver or Fusiee 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: Brenda W. Broadway

3-23-98 (407)699-

(2E034 (10/97)