

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

1997 AUG 28 PM 1:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **P96000042632 (5)**

1. Corporation Name

MJ CHERMAK CONSTRUCTION COMPANY

Principal Place of Business

Mailing Address

**POST OFFICE BOX 618696
ORLANDO FL 32861**

**POST OFFICE BOX 618696
ORLANDO FL 32861**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 7716 CHAPEL HILL DR		26 7716 CHAPEL HILL DR		05/10/1996	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	Applied For
23 ORLANDO, FL		28 ORLANDO, FL		59-3881136	Not Applicable
24 32819		29 32819		5. Certificate of Status Desired	\$8.75 Additional Fee Required
25 US		30 US		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
26 US		30 US		8. This corporation owes taxes on its assets	
27 US		30 US		Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**CHERMAK, DIANE RAE
2460 LIELASUS DRIVE
ORLANDO FL 32835**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	CHERMAK, MARK J	1.2 NAME	
STREET ADDRESS	2460 LIELASUS DRIVE	1.3 STREET ADDRESS	7716 CHAPEL HILL DR
CITY-ST-ZIP	ORLANDO FL 32835	1.4 CITY-ST-ZIP	ORLANDO, FL 32819
TITLE	V	2.1 TITLE	
NAME	CHERMAK, DIANE RAE	2.2 NAME	
STREET ADDRESS	2460 LIELASUS DRIVE	2.3 STREET ADDRESS	7716 CHAPEL HILL DR
CITY-ST-ZIP	ORLANDO FL 32835	2.4 CITY-ST-ZIP	ORLANDO, FL 32819
TITLE		3.1 TITLE	
NAME		3.2 NAME	700002280507-4
STREET ADDRESS		3.3 STREET ADDRESS	-08/28/97--01130-015
CITY-ST-ZIP		3.4 CITY-ST-ZIP	****165.00 ****165.00
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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, on an attachment with an address.

SIGNATURE

NOT REQUIRED

7-24-97

407-363-7172

CR2E034 (4/97)