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Mar 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000042839 (6)**

1. Corporation Name
TRI COUNTY GENERAL CONSTRUCTION, INC.

Principal Place of Business
8051 W MCNAB RD
TAMARAC FL 33321

Mailing Address
8051 W MCNAB RD
TAMARAC FL 33321-3254

3. Date Incorporated or Qualified: **05/13/1996**
3a. Date of Last Report:

4. FEI Number: 65-0666934 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent
GERLICK, SUSAN D
8051 W MCNAB RD
TAMARAC FL 33321

10. Name and Address of New Registered Agent
81 Name: MARSHA COHEN
82 Street Address (P.O. Box Number is Not Acceptable): 8051 W McNab Rd
83
84 City: Tamarac, FL. **FL** 85 Zip Code: 33321

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: Marsha P. Cohen MARSHA COHEN DATE: 3/13/97
(Signature of New Registered Agent, if changed) (Name of New Registered Agent, typed or printed)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D		☐ Change ☐ Addition
NAME	GERLICK, SUSAN D		
STREET ADDRESS	8051 W MCNAB RD		
CITY-ST-ZIP	TAMARAC FL 33321		
TITLE	☐ DELETE	21 TITLE: SEC/TREASURER	☐ Change ☒ Addition
NAME		22 NAME: MARSHA COHEN	
STREET ADDRESS		23 STREET ADDRESS: 8050 W. McNab Rd #314	
CITY-ST-ZIP		24 CITY-ST-ZIP: Tamarac, FL. 33321	
TITLE	☐ DELETE	31 TITLE: V. PRESIDENT	☐ Change ☒ Addition
NAME		32 NAME: SABRINA ROGERS	
STREET ADDRESS		33 STREET ADDRESS: 8108 NW 103 Terrace	
CITY-ST-ZIP		34 CITY-ST-ZIP: Tamarac, FL. 33321	
TITLE	☐ DELETE	41 TITLE:	☐ Change ☐ Addition
NAME		42 NAME:	
STREET ADDRESS		43 STREET ADDRESS:	
CITY-ST-ZIP		44 CITY-ST-ZIP:	
TITLE	☐ DELETE	51 TITLE:	☐ Change ☐ Addition
NAME		52 NAME:	
STREET ADDRESS		53 STREET ADDRESS:	
CITY-ST-ZIP		54 CITY-ST-ZIP:	
TITLE	☐ DELETE	61 TITLE:	☐ Change ☐ Addition
NAME		62 NAME:	
STREET ADDRESS		63 STREET ADDRESS:	
CITY-ST-ZIP		64 CITY-ST-ZIP:	

CR2E034 (9/96)

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 electronic 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 address.

SIGNATURE: Marsha P. Cohen MARSHA COHEN Tamarac, FL. 33321