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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000043531 (8)

LIGHTHOUSE CONSTRUCTION AND RESTORATION, INC.

FILED Mar 25 1998 8:00am Secretary of State

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					148
Principal Place of Business Mailing Address					900 1110) WIES IIIS 1131 1451
101 WHITAKER ROAD STE 2 101 WHITAKER ROAD ST			2		
LUT2 FL 33549		LUTZ FL 33549		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				06/01/1996	
2. Principal P	lace of Business	2a. Mailing Address	,	4. FEI Number	Applied For
21		26		59-3383127	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Olatos Desired	Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	0	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	urrent year Intangible Yes No
24	25 Name and Address of Curren		30	Personal Property Tax due June 30. 10. Name and Address of New Registered	
70		it the graterious Agent	81 Name	(0, 1,2,1,2,1,2,1,2,1,2,1,2,1,2,1,2,1,2,1,	
TERRY, JACK					
	I WHITAKER ROAD STE 2		62 Street	Address (P.O. Box Number is Not Acceptable)	
LUTZ FL 33549			83		
			84 City	F	L 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607 1508, Florida Statutes	s, the above-named	corporation submits this statement for the purpose poration's board of directors. I hereby accept the ap	of changing its registered
office or r	egistered agent, or both, in the State im familiar with, and accept the obligi	of Florida Such change was ଷu ations of, Section 607.0505, Flor	ithorized by the corp ida Statutes.	poration's board of directors. I hereby accept the ap	opoiniment as registered
SIGNATURE					
SIGNATIONE	Signature, typed or printed name of registered age	nt and tit diapproable (NOTE:	Registered Agent signature		
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	TERRY, JACK		1.2 NAME		
STREET ADDRESS	101 WHITAKER ROAD STE 2		1.3 STREET ADDRESS		
CITY-ST-ZIP	LUTZ FL 33549	☐ DELETE	1.4 CITY - ST - ZIP		Change Addition
TITLE			2.1 TITLE		C) cusings C) Addition
NAME			2.2 NAME		
STREET ADORESS			2.3 STREET ADDRESS		
CITY-S1-ZIP TITLE		DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. 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 ADORESS			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			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

14. Thereby 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 continuation or the receiver or frustee employees to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 iffahanged, or on invalidation with an address.

3/14/98