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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENTOS STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000047300 (4)

REGAL RUILDERS INC

NEGAL	. DUILULING, 1110-							
Principal Pla	ice of Business	Mailing Address			i <b>in b</b> hi <b>nr</b> e inn eatha airte	BARRA MONTA BANN BUNTA BU		l Lait ion
8102 NW 73RD AVE TAMARAC FL 33321 8102 NW 73RD AVE TAMARAC FL 33321-7004								
					Date Incorporated or <b>05/29/1996</b>	Qualified 3a. (	Date of Last Ri	eport
2. Principa: 21	Place of Business	2a. Mailing Address 26		4.	FEI Number 65-066 S	884	h	plied For t Applicable
Տեւքը, Ap <b>22</b>	t. #, etc	Suitc, Apt. #, etc.		5,	Certificate of Status	Desired 🗀	\$8.75 A	
City & Sta	ate	City & State			Election Campaign F Trust Fund Contribut		\$5.00 Added t	
Zip <b>24</b>	Country 25	Zip <b>29</b>	Country 30	İ	This corporation has Florida Statutes	Yes	☐ No	199.032,
	<ol><li>Name and Address of Cur</li></ol>	rent Registered Agent		10.	Name and Address	of New Registered	1 Agent	1
PA	ARKER, JAMES V		81	Name				
	02 NW 73RD AVE	82	Street Address (D	O. Box Number is N	t Acceptable)			
TA	MARAC FL 33321			Sireet Address (F	.O. DOX 140HHDE: 15 HA	n Acceptable)		
]			83					
			84	Dity		F	85 Zip (	Code
	il to the provisions of Sections 607.6 registered agent, or both, in the St arn familiar with, and accept the ob	0502 and 607.1508, Florida Statute ate of Florida. Such change was ai digations of, Section 607.0505, Flor	s, the above-ruthorized by the rida Statutes.	amed corporation is b	n submits this statement opera of directors. I he	ent for the purpose ereby accept the ap	of changing its opointment as	s registered registered
SIGNATURE	Signature, typed or proted name of registered	agent and title if applicable (NOTE	: Registered Agent	signature required when		DATE		
<b>412</b> .		AND DIRECTORS	13.		ADDITIONS/CHANGE	S TO OFFICERS AN	ID DIRECTOR	
THU	D	DELETE	1.1 TITLE	PRES	SIDENT, C	DIRECTOR	Change	Addition
NAME	PARKER, JAMES V		1.2 NAME	ļ	•			
STREET ADDRESS			1.3 STREET AD	DRESS				
CHY-SI-ZIP	TAMARAC FL 33321		1.4 CITY-ST-	rip .				
TIFLE		☐ DELETE	2.1 TITLE	7			☐ Change	Addition
NAME			22 NAME					
STREET ADDRESS	; [		2.3 STREET AC	DRESS				
C:TY - ST - ZIP			2. 4 CITY-ST-	ZIP	* *	•		
THLE		DELETE	3.1 TITLE				Change	Addition
NAME			3.2 NAME					
STREET ADDRESS	5		33 STREET AC	DRESS				
CITY - S1 - ZIP			34. CHTY - ST-	ZIP				
1074		DELETE	4.1 TITLE				Change	Addition
NAME.	1		4. 2 NAME	j				
STREET ADDRESS	.		4.3 STREET AT	DRESS				

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 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 and 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 is appears in Block 12 or Block 13 if changed, or on an attachment with an address.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

TITLE

TITLE

NAME

STREET ADORESS

STREET ADDRESS

CITY-ST-ZIE

DELETE

DELETE

\*\*\*165.00

400002130824 -04/02/97--01005--007

Change

Change

Addition

**FILED** 

Apr 01 1997 8:00am

Secretary of State