05-06-1999 90257 030 \*\*\*150.00

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

Mailing Address 121 US HIGHWAY 1

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000054393

1. Corporation Name

Principal Place of Business

121 US HIGHWAY 1 STE. 106

**B.A.T. CONSTRUCTION INC.** 

KEY WEST FL	33040	KEY WEST FL 33040	KEY WEST FL 33040			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed	3. Date Incorporated or Qualifed		
					06/24/1996			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26			65-0822824		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.	.75 Additional	
22		27			5. Certificate of Status Desired	<u>_</u>	ee Required	
City & State	9	City & State			6. Election Campaign Financing	\$5	5.00 May Be	
23	28				Trust Fund Contribution	Ac	dded to Fees	
Zip	Country Zip Cou			У	8. This corporation owes the current year	ar Intangible		
24	25	29	30		Personal Property Tax.	X Ye	s 🗆 No	
	9. Name and Address of C	Current Registered Agent			10. Name and Address of New Registe	red Agent		
				Name				
BRAEUNIG, PHILLIP				82 Street Address (P.O. Box Number is Not Acceptable)				
	CROSS STREET							
KEY	WEST FL 33040		83	3				
			84	City		85	Zip Code	
			0-	City	l	$FL\mid ``\mid$	210 0000	
11. Pursuant	to the provisions of Sections 60	7.0502 and 607.1508, Florida Statutes	s, the abov	e-named	corporation submits this statement for the purpos	e of changi	ing 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 Pulli B Phillip Braeunig, Registered Agent 4/26/99								
SIGNATURE	Signatur, typed or printed name of pogiste	ored agent and title if applicable. (NOTE: F	Registered Age	nt signature	required when reinstating) DAT	E		
12.	OFFICE	RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIR		
TITLE	P	☐ DELETE	1.1 TITLE			☐ Ch	nange 🔲 Addition	
NAME	BRAUEUNIG, PHILLIP		1.2 NAME					
STREET ADDRESS	14 F CROSS STREET		1.3 STREE	TADDRESS			ļ	
CITY-ST-ZIP	KEY WEST FL 33040		14 CITY-1	ST-ZIP				
TITLE		☐ DELETE	2.1 TITLE		Secretary	Ch	nange 🙀 Addition	
NAME			2 2 NAME		Michael Anson			
STREET ADDRESS			2.3 STREE	TADDRESS				
CITY-ST-ZIP			2 4 CITY-	ST-ZIP	Big Pine Key, FL 330	13		
TITLE		☐ DELETE	3.1 TITLE		Dig Fine Rey, Fin-350	<del>1</del> □ Ch	nange 🔲 Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE			□Ch	hange Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	TADDRESS				
CITY-ST-ZIP			4.4 CITY					
TITLE		☐ DELETE	5.1 TITLE			☐ Ch	nange Addition	
NAME			5.2 NAME		]		}	
STREET ADDRESS			5.3 STREE	T ADDRESS				
			54 CITY-1					
CITY-SY-ZIP TITLE		☐ DELETE	61 TITLE		<del> </del>	[] Ch	hange Addition	
			6.2 NAME				· -	
NAME				T ADDRESS	J		Į	
STREET ADDRESS			5.5 OTAL		1			

14. I 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, or on an attachment with an address, with all other like empowered.

4/26/99

305-797-3052

Daytime Phone #