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 # P9600059650 (7)

TAMPA BAY CONSTRUCTION & DEVELOPMENT, INC.

W PARKINSON MYERS

WTZ FL

3340 CRENSHAW LAKE RD

NAME

TITLE

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

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CITY-ST-ZIP

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Principal Place of Business Mailing Address 3340 CRENSHAW LAKE RD 3340 CRENSHAW LAKE RD **LUTZ FL 33549 LUTZ FL 33549** 3. Date Incorporated or Qualified 07/16/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 26 59-3393121 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing 23 28 Trust Fund Contribution Zip Country Country Z_{ip} 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 81 W PARKINSON MYERS 3340 CRENSHAW LAKE RD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 3700 BARNETT PLAZA 83 **LUTZ FL 33549** 84 City 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 trite if approvable (NOTL: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE NAME **VICTOR R FRANSEN** 1.2 NAME STREET ADDRESS 837 DOLLY MADISON BLVD 1.3 STREET ADDRESS MCLEAN VA CITY-ST-ZIP 14 CITY-ST-ZIP TITLE DELETE 21 THLE

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FILED Apr 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE Applied For Not Applicable \$8.75 Additional Fee Regulred \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Yes Yes 10. Name and Address of New Registered Agent 85 Zip Code ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ☐ Change Addition Change Addition Change Addition Change Addition Addition

14. I hereby certify that the information supplied with this filing does not quality 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 it changed, or on an attachment with an address

2.2 NAME

3.1 TITLE

3.2 NAME

4.1 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME

6.1 THEE

6.2 NAME

2.3 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STHEET ADDRESS

5.4 CITY - \$1 - ZIP

4.4 CITY-ST-ZIP

3.4. CHY-ST-ZIP

2. 4 CITY - S1 - ZIP