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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000071683 (2)

JEFF KUJATH CONSTRUCTION CORP.

FILED May 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 32948 OIL WELL ROAD 32948 OIL WELL ROAD PUNT GORDA FL 33955 PUNT GORDA FL 33955 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/26/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 65-0692161 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation cwes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Country ZiD 25 29 30 Personal Property Tax due June 30. 10, Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent B1 Name MASSIE. CHARLES A 14751 EDEN STREET Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33908 63 84 City Zip Code 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 agins; and fille if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, OFFICERS AND DIRECTORS DELETE Change Addition TITLE 1.3 TITLE NAME KUJATH, JEFF J 1.2 NAME 32948 OIL WELL ROAD STREET ADDRESS 1.3 STREET ADDRESS **PUNT GORDA FL 33955** CITY-ST-ZiP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 City-St-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. City-ST-ZIP DELETE Addition TITLE 4.1 TITLE Change 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 eath; 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

CIGNATURE:

Tetakunth 42698 941575 1059