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 # 1. Corporation Name P96000077397 (3)

WIREMEN DESIGN & BUILD, INC.

FILED Apr 23 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				71 18811 18848 11116 18	1311 1381 2381
3180 STIRLING RD. 3180 STIRLING RD.							
HOLLYWOOD FL 33021		HOLLYWOOD FL 33021 US			DO NOT WRITE IN TH	HS SPACE	
US					3. Date Incorporated or Qualified		
					09/16/1996		J
2. Principal Place of Business 2a. Mailing Ad				0 1	4. FEI Number	Ar	plied For
	Stirling Road	26 3180 Strling K		a Kood	65-0697626	No	ot Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
		City & State			6. Election Campaign Financing	on Campaign Financing \$5.00 May Be	
23 Hollywood, FL		28 Holly wood, IFC		Trust Fund Contribution	Added t		
Zip	Country	Zip	Cou	intry	8. This corporation owes or has paid the	current year int	angible
24 3309	25 USA		30	usa	Personal Property Tax due June 30.] No
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New Register	ed Agent	
TRINGO, DAVID				81 Name			Į.
8362 PINES BLVD. SUITE 126 PEMBROKE PINES FL 33024				82 Street Addre	ess (P.O. Box Number is Not Acceptable)		
				83	71-11-11-11-11-11-11-11-11-11-11-11-11-1		
				84 City		85 Zip 0	Code
44 Purcupat t	to the provinces of Cartions 607 0507	and 607 1609 Florida Statuto	o tho of	l l			o registered
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 primed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinslating) DATE							
12,	Signature, typed or printed name of registered ager OFFICERS AND		Registere	d Agent signature require	ADDITIONS/CHANGES TO OFFICERS		IS IN 12
TITLE	The state of the s		111	ILE T	ADDITIONAL VALUE OF CONTROL OF CO	Change	Addition
NAME	TRINGO, DAVID		1,2 N				
STREET ADDRESS	8362 PINES BLVD., STE. 126		1.3 \$1	REET ADDRESS			
CITY-ST-ZIP	PEMBROKE PINES FL		1.4 CI	TY-ST-ZIP)
TITLE	P	DELETE	2.1 TI			☐ Change	Addition
NAME	iler, ralph k jr.		2.2 N	ME			ŀ
STREET ADDRESS	8180 STIRLING RD.		2.3 \$1	REET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL		2 4 0	ITY-ST-ZIP			
TALE		☐ DELETE	3.1 TI	TLE		☐ Change	☐ Addition
NAME			3.2 N	ME			ŀ
STREET ADDRESS			1	REET ADDRESS			
CITY-ST-ZIP			_	ITY-ST-ZIP			7.446
TITLE		☐ DELETE	4.1 70		٠,١	L Change	☐ Addition
NAME			4.2 N		·		
STREET ADORESS			1	REET ADDRESS			{
CITY-ST-ZIP TITLE		DELETE	5.1 TI	TY-ST-ZIP		Change	Addition
NAME		□ ptrut	52 N/	1		Onlings	Aboilion
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				i i			
TITLE		☐ DELETE	5.4 CI	TY-ST-ZIP		Change	Addition
NAME			6.2 N	i i			
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP			
	ertify that the information supplied with	h this filing does not qualify for			Section 119 07(3)(i) Florida Statutes I furthe	r certify that the	information

rhereby certify that the information supplied with this little information indicated on this annual report or supplied with this indicated on this annual report or supplied 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.

SIGNATURE: