

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



PROFIT
CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Martham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000079962 (2)

1. Corporation Name

CORE CONSTRUCTION GROUP, INC.

Principal Place of Business
11725 RUBY LAKE ROAD
ORLANDO FL 32836

Mailing Address
11725 RUBY LAKE ROAD
ORLANDO FL 32836

2. Principal Place of Business

21 8654 ALEGRE CIRCLE
Suite, Apt. #, etc.

2a. Mailing Address

26 8654 ALEGRE CIRCLE
Suite, Apt. #, etc.

22 City & State
23 ORLANDO, FL

27 City & State
28 ORLANDO, FL

24 Zip 32836
25 Country

29 Zip 32836
30 Country

9. Name and Address of Current Registered Agent

HAIDER, DILRUBA
11725 RUBY LAKE ROAD
ORLANDO FL 32836

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
8654 ALEGRE CIRCLE

83

84 City ORLANDO

Applied For
Not Applicable

\$8.75 Additional
Fee Required

\$5.00 May Be
Added to Fees

Yes No

10. Name and Address of New Registered Agent

FL 32836

11. Pursuant to the provisions of Sections 607.0507 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

Dilruba Haider

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/14/98

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	1. NAME 2. STREET ADDRESS 3. CITY-ST-ZIP	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 8654 ALEGRE CIRCLE ORLANDO, FL 32836
TITLE	2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	3. NAME 4. STREET ADDRESS 5. CITY-ST-ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	4. NAME 5. STREET ADDRESS 6. CITY-ST-ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	5. NAME 6. STREET ADDRESS 7. CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	6. NAME 7. STREET ADDRESS 8. CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *Dilruba Haider*

4/14/98

CR2E034 (1097)