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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P96000081953 (7)

M & B CONSTRUCTION AND FRAMING, INC.

Principal Place of Business Mailing Address 492 MANGO AVENUE **SEBASTIAN FL 32958** 糖品が 2. Principal Place of Business 21 26 Suite, Apt. #, etc. 22 27 City & State City & State 23 28 Zip 24 25 29 9. Name and Address of Current Registered Agent MONAHAN, MARTIN G **492 MANGO AVENUE**

FILED May 15 1998 8:00am Secretary of State



492 MANGO AVENUE SEBASTIAN FL 32958 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/03/1996 2a. Mailing Address 4. FEI Number Applied For Not Applicable 65-0700289 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year intangible Yes 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **SEBASTIAN FL 32958** 83 City R4 Zip Code 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 title if applicable (NOT). Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1 1 TITLE DIEPHOUSE, ROBERT NAME 1.2 NAME **492 MANGO AVENUE** STREET ADDRESS 1.3 STREET ADDRESS SEBASTIAN FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ___ Change Addition TITLE 2.1 TITLE MONAHAN, MARTIN G NAME 2.2 NAME **492 MANGO AVENUE** STREET ADDRESS 2 3 STREET ADDRESS SEBASTIAN FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITUE MONAHAN, NIKKI NAME 3.2 NAME 492 MANGO AVE STREET ADORESS 3 3 STREET ADDRESS SEBASTIAN FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7IP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP DELETE Addition Change TITLE 61 TITLE NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS

14. Thereby certify that the information supplied with this filling 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 suppliemental 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, on an artificient with an address.

SIGNATURE:

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OFFICER OR DIRECTOR

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