FILE NOW: FILING FEE AFTER MAY 1 IS \$550 00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthum

Secretary of State

DIVISION OF CORPORATIONS

FILED Apr 29 1997 8:00am Secretary of State

	MENT # P96000 s construction incorp				
Principal Place	e of Business	Mailing Address		[!BBY!BBY !(B (BI)B \$\)}\ BBY\ BBY\ BBY\	## 48 484 8468 441 64884 2448 1444 1884
2225 N.E. 11TH AVE. WILTON MANORS FL 33305 2225 N.E. 11TH AVE. WILTON MANORS FL 33305			3305-2213		
				3. Date Incorporated or Qualified 10/09/1996	3a. Date of Last Report
_	. Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For
21 Suite Ant	1 26 Suite, Apt. #, etc. Suite, Apt. #, etc.			65-0702214	Not Applicable
22 27			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24	25	29	30		Yes No
201	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Ro	egistered Agent
ROLLER, WILLIAM H					
2225 N.E. 11TH AVE. WILTON MANORS FL 33305			82 Stree	t Address (P.O. Box Number is Not Acceptal	ble)
**1L	TON MANONS IL 55005		83		
•					
			84 City		FL 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obligations.	end 607.1508, Florida Stat of Florida Such change was tions of Section 607.0505.	utes, the above-name s authorized by the co Florida Statutes.	d corporation submits this statement for the proporation's board of directors, I hereby acce	purpose of changing its registered pt the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agen	of and title if applicable (No	OIE Register of April 5 confl	ric required whon kinstating)	4-1-97 DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12 Change Addition
TITLE NAME	president	DELETE DELETE	1.1 TITLE 1.2 NAME		
STREET ADDRESS	WILLIAM HOWARD ROLLER SS 2225 NE 11 Th AVE		1,3 STREET ADDRESS	NONE	18
CITY-ST-ZIP	WiLton MANORS 1	=1 32305	1.4 CITY- ST- ZIP		
TITLE	CONTRACTO TELEMENTS T	DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS	;	
CITY-ST-ZIP	!		2 4 CITY - S1 - ZIP		
TITLE		☐ DELETÉ	3.1 TITLE	7	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	·	
City-St-ZiP Title		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		_ been	4. 2 NAME		
STREET ADDRESS			4 3 STHEET ADDRESS	; }	•
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME		•	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	:]	
CITY-ST-ZIP			5.4 CHY- \$1- ZIP		
TITLE		☐ DELETE	G.1 TITLE		☐ Change ☐ Addition
NAME OTORET LEGISTES			6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS	5	
CITY-ST-ZIP			6.4 C/TY - S1 - ZIP	<u></u>	

14. I do 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.