## 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

P96000093729 (7)

BASKARAN CONSTRUCTION INC.

Principal	Place of	Business

SIGNATURE

## **FILED** May 06 1998 8:00am Secretary of State



4/25/98

9042213719

Principal Place of Business	Mailing Address		a teamen ate rains orn, each early about these after these tree of the feat
301 SONDRA COVE TRAIL EAST JACKSONVILLE FL 32225	301 SONDRA COVE JACKSONVILLE FL 3		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
			11/14/1996
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For
21	26		11.19.102.101
Suite, Apt. #, etc.	Suite, Apt. #, etc.		\$0.75 Additional
22	27		5. Certificate of Status Desired Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23	28		Trust Fund Contribution
Zip Count	ry Zip	Country	8. This corporation owes or has paid the current year Intangible
24 25	29	30	Personal Property Tax due June 30. 🔲 Yes 🔲 No
<del></del>	ess of Current Registered Agent		10. Name and Address of New Registered Agent
<b>WOLFE</b> , LARRY		81 Nan	ne e
200-A JOHN KNOX RO		<b>82</b> Stre	et Address (P.O. Box Number is Not Acceptable)
TALLAHASSEE FL 323	03-6643		
		83	
		<b>B4</b> City	85 Zip Code
			FL S 29 souls
<ol> <li>Pursuant to the provisions of Sec office or registered agent, or both</li> </ol>	ctions 607.0502 and 607.1508, Florida Sta th, in the State of Florida, Such change wa	itutes, the above-nam as authorized by the c	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and ac	cept the obligations of, Section 607.0505,	Florida Statutes	orporation's board of directors. I hereby accept the appointment as registered
SIGNATURE			1
	ne of registered agent and title if applicable (f DFFICERS AND DIRECTORS	NOTE: Registered Agent signa	hare required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIREQ*TORS IN 12
TITLE P	DELETE	1.1 TITLE	Thanse Addition
NAME BUSKARAN, SU	<del></del> :	1.2 NAME	BASKARAW Sukumaraw
STREET ADDRESS 301 SONDRA COVE TRAIL EAST		1.3 STREET ADDRES	· 1
CITY-ST-ZIP JACKSONVILLE		1.4 CITY-ST-ZIP	
TITLE V	☐ DELETE	21 TITLE	Change Addition
NAME BASKARAN, YVO	——·	22 NAME	
STREET ADDRESS 301 SONDRA COVE TRAIL EAST		2.3 STREET ADDRES	s ·
CITY-ST-ZIP JACKSONVILLE		2.4 CITY-ST-ZIP	
TITLE	DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADORESS		3.3 STREET ADDRES	s l
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	DELETE	4.1 TITLE	Change Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRES	s
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE	51 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRES	s
CITY-ST-ZIP		5.4 CITY - ST - ZIP	
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRES	s i
CITY-ST-ZIP		6.4 CITY - ST - ZIP	
			ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information signature shall have the same legal effect as if made under oath; that I am an
officer or director of the corporal	tion 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 trchanged	, or on an attachment with an address.		1