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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000098929 (8)

T & D BUILDERS,INC.

FILED

May 06 1997 8:00am

Secretary of State

Principal Place of Business Mailing Address				I (BRISANI IIA 18118 BISIN ARIII BASIN VAIN HAIN SAIN SAIN SAIN INN SAIN SAIN			
9810 618T WAT	Y SOUTH	9810 61ST WAY SOUTH	61ST WAY SOUTH				
#D Boynton Bea	CH FL 33437	#D BOYNTON BEACH FL 33437-2826					
					3. Date Incorporated or Qualified 12/05/1996	3a. Date of La	est Report
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	2	Applied For
21		26			65-0713819		Not Applicable
Suite, Apt.		Suite, Apt. #, etc. 27			5. Certificate of Status Desired		75 Additional e Required
City & Stat	te	City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
Zip	Country	Ζιρ	Coun	iry	8. This corporation has liability for I		der s. 199.032,
24	25	29	30			Yes 🔀 No	
4.601	9, Name and Address of Curr	ent Hegistered Agent		Name	10. Name and Address of New Re	Jisterea Agent	
	OLUCCI, DAVID J			Name			
9810 #D	81ST WAY SIUTH		[4	Street Add	ress (P.O. Box Number is Not Acceptab	le)	
	NTON BEACH FL 33437		- -	33			
			1	City		FL 85	Zip Code
office or	registered agent, or both, in the Sta am familiar with, and accept the obt	te of Horida. Such change wa igations of, Section 607.0505,	is authorized Florida Statu	by the corpora tes.	poration submits this statement for the p tion's board of directors. I hereby accep	t the appointmen	nt as registered
10	Signature, typed or printed name of registered a	agent and tille if applicable (N ND DIRECTORS	IOTE: Registered :	agent signature requi	ized when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CDC AND DIDEC	PTOPS IN 12
12.	ID OFFICENS A	DELETE	1.1 101	F	ABBITIONS/CHANGES TO OFFIC	Cha	
NAME	HARRISON, THOMAS		1.2 NAM	ļ			227
STREET ADDRESS	710 FRANKLIN ROAD			EET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL 3340	5	1	7-ST-ZIP			
TITLE	D	DELETE	2 1 11/1			☐ Chá	inge Addition
NAME	AGNOLUCCI, DAVID J		22 NAM	IE			
STREET ADDRESS	9810 61ST WAY SOUTH #D		23 STR	FET ADDRESS			
CITY-ST-ZIP	BOYNTON BEACH FL 33437		2. 4 CIT	Y - S1 - ZIP			
TITLE		☐ DELETE	3 1 TITE	ř		☐ Cha	nge Addition
NAME			3 2 NAM	IE			
STREET ADDRESS			3.3 STR	EE1 ADDRESS			
CITY-ST-ZIP		The second		Y-ST-ZIP			
TITLE		☐ DELFTE	4.1 1111]		L Cha	inge L_ Addition
NAME			4. 2 NA	·			
STREET ADDRESS	İ			EFT ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.1 THU	-SI-ZIP		☐ Cha	nge Addition
NAME		Ferri Occup	5.2 NAN	l			g
STREET ADDRESS				eet address			
CITY-ST-ZIP				1-SI-70P			
TITLE		DELETE	6.1 7:TI			Chá	inge Addition
NAME			6.2 NAM				
STREET ADORESS	\		l l	EET ADDRESS			
CITY-ST-ZIP				-ST-ZIP			

14. I do hereby 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 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.

EIGNATURE: VICANIA (10 Jacks / President)4/29/97 1561/540-864