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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Mar 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000101674 (5)

ADM CONSTRUCTION MANAGEMENT, INC.

22776 EL DORADO DRIVE 22776 EL DORADO DRIVE **BOCA RATON FL 33433 BOCA RATON FL 33433-6001** 3. Date Incorporated or Qualified 3a. Date of Last Report 12/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 22728 ELDORADO DRIVE 26 JO728 ELOORADO DRIVE Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing BOCA RATIN, FL BOCA RATON Trust Fund Contribution Added to Fees Country This corporation has liability for intangible taxunder s. 199.032, 30 PALM BEACH Yes ☑ No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CROWN, NANCY E 7251 W. PALMETTO PARK RD., STE. 200 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33433** 83 84 City 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed rame of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) DELETE Change Addition LILL 1.1 TITLE CALDERONE, DOMENICK NAME 1.2 NAME 22776 EL DORADO DRIVE 1.3 STREET ADDRESS STREET ADORESS **BOCA RATON FL 33433** CITY-SI-ZE 1.4 City-ST-ZIP DELETE THE 21 TITLE Change Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS Citir - ST 28 2.4 CITY-ST-ZIP DELETE Change Addition THILE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-S1-Zif 3 4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 City - St - ZiP DELETE Change ___ Addition TITLE 51 TITLE 5.2 NAME STHEET ASSURESS 5.3 STREET ADDRESS CHY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ___ Addition Ditt 61 TITLE NAMI 6.2 NAME STHEET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 Biock 13 if changed or on an aparchment with an address.

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

vmenull Calderone