## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000102760 (1)

CORNERSTONE CONSTRUCTION OF PINELLAS, INC.

**FILED** Apr 14 1998 8:00am Secretary of State



Principal Place	of Business	Mailing	Mailing Address					* 1251-25 - 12 18(42 214) 25(1) 25(1) 45(1) 45(1) 45(1) 45(1) 15(1) 15(1) 15(1)							
				1107 SUNSET RIDGE LANE											
TARPON SPRING FL 34689			TARPO	TARPON SPRING FL 34689					DO NOT WRITE IN THIS SPACE						
								_ <u>-</u> -	3 Dai	e Incorporated or Q		11 11110	JI NOL		
								- 1		/19/1996	aamoa				
2. Principal Pl	ace of Business		2a. Maili	ng Address						Number		-		Applied	i For
21		26						59-3414246					-: -	plicable	
Suite, Apt	#, etc.		Suite, Apt #, etc.							<del></del>		\$8.75			
22	•	27				- 1	<b>5.</b> Ce	tificate of Status Dea	sired			Require			
City & State	•	City & Stato					6. Ele	ction Campaign Fina	ancing		\$5.0	0 May	Be		
23			28						st Fund Contribution	_			d to Fe		
Zip		Country	Zip		C	ountry			8. Thi	s corporation owes o	or has pai	id the our	rep•year I	ntangi	ble
24	25		29		30				Per	sonal Property Tax o	due June	30.	Yes		
	9. Name and	Address of Curren	t Registered	Agent				1	10. Na	me and Address of	New Reg	gistered .	Agent		
GEO	DRGAKAKIS, N	ICK				81	Name								
	7 SUNSET RID					Street	Addrage	(P.O.	Box Number is Not A	Accentah	ıle)				
	RPON SPRING					82 Street Addres			DOX HUMBON IN HOUR	TOODPIUD	,				
,,,,	011 01 11110					83				•					
						84	City						85 Zij	p Code	
							•					FL	,   ``   `		
11. Pursuant t	to the provisions of the control of	of Sections 607.050 or both, in the State	2 and 607.15 of Florida, Si	08, Florida Statu ich change was	ites, the authoria	above zed by	⊱named the corr	corporat poration's	tion su s boar	bmits this statement d of directors. I here	for the p	urpose of of the app	i changing Jointment a	its reç is regi:	gistered stered
agent. I ar	m familiar with, ar	id accept the obliga	ations of, Sec	tion 607.0505, F	lorida S	itatutes	i.				-,,				
SIGNATURE .	Signature, byped or non	ted name of registered age	nl and title if applic	able (NO	TF Registe	ered Ace	ot signature	required wi	rhen reins	lating)		DATE			
12.		OFFICERS AN			13					ITIONS/CHANGES T	O OFFIC		DIRECTO	ORS IN	12
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CITY-ST-ZIP		RING FL 34689				4 CITY-S									
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NAME	GEORGAKAI	KIS NICK		_	2.2	2 NAME									
STREET ADDRESS		T RIDGE LANE				3 STREET	ADDRESS								
CITY-ST-ZIP		RING FL 34689				4 CITY-S									
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NAME						2 NAME									
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						4. CITY - S									
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NAME					6.2	2 NAME									
STREET ADDRESS					6.3	3 STREET	ADDRESS								:
1 000 07 310 I						4 CITY 6	T 71D	1							

14. I 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 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 chapter in an attachment with an address.