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 # P9700001029 (2)

RIORDAN DESIGN & CONSTRUCTION INC.

Principal Place of Business

Mailing Address

FILED Feb 17 1998 8:00am Secretary of State



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7014 UPLAND GLADE TALLAHASSEE FL 32312					7014 UPLAND GLADE TALLAHASSEE FL 32312									DO.	NICAT M	DITE	INI TIJIO	ep/	CE			
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											3.		Incorpora		r Quali	Hed						١
2. Pr	Principal Place of Business 2					Mailing Address						01/06/1997 4. FEI Number							Anr	pplied For		
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	Suite, Apt. #, etc.				Suite, Apt. #, etc.								1 -						8.7	4	dditional	7
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Ci	City & State				City & State							Election Campaign Financing \$5.00 May							May Be			
23						28					Trust Fund Contribution Added to Fees											
Zi	р	Country						Country			8. This corporation owes or has paid the current year Intangible											
24		9, Name and Address of Current			29 30			 			Personal Property Tax due June 30. Fes No 10. Name and Address of New Registered Agent									_		
				nt Regi	stered	Agent		81			10.	Nam	ne and Ad	dress	of Ne	w Reg	istered	Age	nt			\dashv
	RIORDAN, C							01	Nar	ne												-
7014 UPLAND GLADE TALLAHASSEE FL 32312									Stre	et Addre	Address (P.O. Box Number is Not Acceptable)										٦	
	IALLAMASS		L 32312					83														\dashv
																			7 7 12			
								84	City	,							FL	_ {	15 Z	Zip C	ode	ı
11, F	Pursuant to the provi	sions	of S ections 607.050	02 and	607.15	08, Florida Sta	tutes, the	above	-nam	ed corpo	oration	n sub	mits this s	tatem	ent for	the pu	ITDOSA O	of co	angin	g its	registered	亓
(office or registered a agent. I am familiar v	gent, vith, a	or both, in the State	of Flor	rida. Su of. Sec	uch change wa tion 607.0505.	as authoriz Florida St	ed by atules	the c	corporatio	on's b	ooard	of directo	rs. I hi	ereby a	ccept	the app	poin'	lment	as r	egistered	
	ATURE			,																		
SIGIL	Signature, lype	d or thi	ited name of registered ag	ent and tit	ie if apph	cable (N	NOTE Registe	ed Age	nt signa	alure required	d when	reinstal	ling)				DATE					
12.			OFFICERS AN	ID DIRE	C10R		13				Α	ADDIT	TIONS/CH	ANGE	STOC)FFIC	ERS AN	_				_ }
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14. Thereby 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 of supplemental formula 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, of an algoriment with an address.

2/10/08