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

PROFIT CORPORATION ANNUAL REPORT

**1998** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 06 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9700004758 (3)

UDC-INDRIO QUARRY, INC.					
				1 48 DI 48 DI 18 18 18 18 18 DI 18 D	NA BIRK KEBAN BIKO MAN IBBI
Principal Place of Business		Mailing Address		r i Maridat tie i esti i dati batte metti Antif antit	ISAN DIDIN ADDON ANSAN JERS NODE
10321 WEST ATLANTIC AVENUE 10321 WEST ATLANTIC AVENUE					
DELRAY BEACH FL 33446 DELRAY BEACH FL 33446			3	DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
				01/16/1997	
<del></del>	lace of Business	2a, Mailing Address		4. FEI Number	Applied For
21	*	26		65-0720138	Not Applicable
Suite, Apt.	₩, <b>9</b> IC.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9, Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
AMERILAWYER CHARTERED 81 Nam 166				CR CINA	
343 ALMERIA-AVENUE			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
CORAL GABLES FL 33134			83 1030	21 Watluntie	che_
l			03		
			84 City	eran Sear FI	85 Zig Code
11. Pursuant te the provisions of Sections 017.0502 and 607.1508, Florida Statutes, the above-named corporation subplits this statement for the purpose of changing its registered office of 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. I am facilitar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE LINE (ROOER FINA)					
12.	Stortagie, typodror printed name of registeral right OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PSD	DELETE	1.1 TITLE	ABBITTOTO TO ATTOCK A	Change Addition
NAME	FINA, ROGER		1.2 NAME		_ , _
STREET ADDRESS	10321 WEST ATLANTIC AVEN	UE	1.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33446		1.4 CHTY - ST - ZIP	·	
TITLE	VD	DELETE	2.1 TITLE	*	Change Addition
NAME	FINA, STAN		2 2 NAME	:	
STREET ADDRESS	10321 WEST ATLANTIC AVEN	UE	23 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33446		2.4 CITY-ST-ZIP		
TITLE	TD	DELETE	3.1 TITLE		Change Addition
NAME	FINA, EMMETT		3.2 NAME		
STREET ADDRESS	10321 WEST ATLANTIC AVEN	UE	3.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33446	DELETE	. 3.4. CITY- ST-ZIP 4.1 TITLE		Change Addition
NAME		La Diction	4.1 GILC 4. 2 NAME		L Change L Routton
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME	·.	
STREET ADDRESS			5.3 STREET ADDRESS	4	27
CITY-ST-ZIP			5.4 CITY - \$1 - ZIP		5,6
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	6000025180	16
STREET ADDRESS		ن ســ	6.3 STREET ADDRESS	6000025180 -05/11/98010150	)20 <sup>-</sup>
CITY-ST-ZIP			6.4 CITY - ST - ZIP	***15U.UB	
Indicated :	on this annual report a supplemental	annual report is true and acc	urate and that my signatur	Section 119.07(3)(i), Florida Statutes. I further of shall have the same legal effect as if made up	nder oath: that I am an
officer or director of the corporation of the receive 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.					