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 # P9700008943 (7)

ISLAND CONSTRUCTION AND DEVELOPMENT, INC.

FILED Jun 30 1998 8:00am Secretary of State



D 1 (1 2)	<u> </u>				
, ,	ce of Business	Mailing Address			
11205 BTH S		11205 8TH STREET FAST	••		
IREASURE ISLAND FL 33706 IREASURE TSLAND FL 3370			UG .	DO NOT WRITE IN THE	S SPACE
1	*			3. Date Incorporated or Qualified	
	*			01/29/1997	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21/160	-BMST. E.	26 /1160 · 875	57. E.	59-3427380	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		U. Commond of Change Decime	Fee Required
City & Stat	_	City & State		6. Election Campaign Financing	\$5.00 May Be
	SUR ESCAVO, FC	28 TREASURE I	Country	Trust Fund Contribution	Added to Fees
24 337			Puella3	 This corporation owes or has paid the c Personal Property Tax due June 30. 	surrent year intangible
24 500	Name and Address of Current		o presing s	10. Name and Address of New Registere	
VANABLU DODITOT I 81 Name					
	205 BTH STREET EAST	Address (P.O. Box Number is Not Acceptable)			
TRIASURE ISLAND FL 33706 82 Street Address (P.O. Box Number is Not Acceptable)					
	\$100 KE 100 KE 12 00 10		83		
1	į		1 2		
İ	さ 20 8 8 8		84 City	usune Island F	L 85 Zip Code 33706
94. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above harmed composition submits this statement for the number 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. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE X Turkty P. Madry					
SIGNATORE	Signature, typed or printed name or region teel agent		Regislered Agent signature	required when reinstating) DATE	F
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D statement of the stat	DELETE	1.1 TITLE	PRESIDENT	Change
NAME	MANKANICH, RUBERT-J		1.2 NAME	TIMOTHY WICGURE	3
STREET ADDRESS	19205-8TH STREET EAST		1.3 STREET ADDRESS	TIMOTHY MCGUAL 11160 - BTY ST. E. TREASURE ISLAND, FL	
CITY-ST-ZIP	TREASURE ISLAND FL 33708	Deter	1.4 CITY - ST - ZIP	TREASURE ISLAND, FL	33706
TITLE	AND STORES	☐ DELETE	2.1 TITLE		Change Addition
NAME	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2.2 NAME		•
STREET ADDRESS	1		2.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>	DELETE	2. 4 CITY - ST - ZIP		Change Addition
TITLE		☐ DELETE	3.1 TITLE		Change Adolson
NAME			3.2 NAME		
STREET ADDRESS	<u> </u>		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	I ,		1		į.
		T DELETE	3.4 CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , , 	Change Addition
NAME	:	DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition
STOREY ADDRESS	•	☐ DELETE	3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME		Change Addition
STREET ADDRESS	1 1 1	☐ DELETE	3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		Change Addition
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14. I 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 suppliemental 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.

SIGNATURE: VA

at la fair x

5-1-58

(8/3) 545-740