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 # P97000018887 (4)

REGENT DESIGN & CONSTRUCTION, INC.

Principal Place of Business	Mailing Address		
8803 RIVERLACHEN WAY	8803 RIVERLACHEN WAY		
RIVERVIEW FL 33569	RIVERVIEW FL 33569		

FILED Jan 16 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address			ANDE HEIDE HALDI INTIL INNE HANDE
8803 RIVERLA	ACHEN WAY	8803 RIVERLACHEN WAY			
RIVERVIEW F	L 33569	RIVERVIEW FL 33569		DO NOT WRITE IN THE	S SPACE
				3. Date Incorporated or Qualified	
				02/24/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3428701	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		5 Floation Compaign Financing	\$5.00 May Be
23	•	28		6. Election Campaign Financing Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	urrent year Intangible
24	25		0	Personal Property Tax due June 30.	☐ Yes Yo
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registere	d Agent
	/ENS, RENEE K		81 Name		
	03 RIVERLACHEN WAY		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
RIV	ERVIEW FL 33569		83		
			65		
			84 City	F	85 Zip Code
11 Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	the above-named corp		
office or r	egistered agent, or both, in the State	e of Florida, Such change was au	thorized by the corporati	oration submits this statement for the purpose on's board of directors. I hereby accept the appropriate the statement of the purpose on's board of directors.	opointment as registered
	Tall may to all a descept of soons	Janois Gri Scotlari Scotlari Scotlari			-5-98
SIGNATURE	Signatury typed or printed name of registered as	gent and title if applicable. (NOTE:	Registered Agent signature require		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AT	
TITLE	PD	☐ DELETE	1,1 TITLE	*	Change Addition
NAME	GIVENS, RENEE K		1.2 NAME		
STREET ADORESS	8803 RIVERLACHEN WAY		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	RIVERVIEW FL 33569 VD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	GIVENS, JERRY L JR	occore	2.2 NAME		
STREET ADDRESS	8803 RIVERLACHEN WAY		2.3 STREET ADDRESS		
CITY-ST-ZIP	RIVERVIEW FL 33569		2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		l priere	4,4 CITY-ST-ZIP		Change Addition
TITLE		L DELETE	5.1 TITLE		☐ Clightige ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS)	6.3 STREET ADDRESS		
CITY-ST-ZIP		/	6.4 CITY-ST-ZIP		
0111-01-20		with this filing does not qualify for		Section 110 07/2)(i) Florida Statutes, i further	portific that the information

ion stated in Section 119.07(3)(i), Florida Statutes. I furner certify that the informatio graps signature shall have the same legal effect as if made under cath; that I am an eport as required by Chapter 607, Florida Statutes; and that my name appears In

1-5-98