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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000022884 (5)

CRAIG PUTNAM CONSTRUCTION, INC.

FILED

Feb 13 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address		I JOON SON HIN HOUSE SON	I INBUG OKABU KUKAN KUKIN BUGU UDDI	
480 PLANT AVENUE NE PALM BAY FL 32907	480 PLANT AVENUE NE			
PALM DAT PL 3280/	PALM BAY FL 32907		DO NOT WRITE IN TH	IS SPACE
			3. Date Incorporated or Qualified	
	,		03/13/1997	
2. Principal Place of Business	2a, Mailing Address		4. EEI Number 12247 2	Applied For
Suite, Apt #, etc	Suite, Apt #, etc.		131-3120160	Not Applicable
22	27]		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	Cily & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the	
24 25	29	30	Personal Property Tax due June 30.	Yes No
g. Name and Address of Current	Registered Agent		10. Name and Address of New Registers	ed Agent
JOHNSON, WILLIAM A		81 Name		
6767 NORTH WICKHAM ROAD #400)F	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MELBOURNE FL 32940		83		
		84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	and 607 1508, Florida Stat	ules, the above-named corp	poration submits this statement for the purpose	of changing its registered
office or registered agent, or both, in the State of agent. I am familiar with, and accept the oblique	l Florida. Such change was	s authorized by the corporat	ion's board of directors. I hereby accept the a	appointment as registered
SIGNATURE				
Styratore, typed or professioning of requirered agent.		TE Registered Agent signature requi	red when reinstating) DATE	· · · · · · · · · · · · · · · · · · ·
12. OF HOERS AND	· · · · · · · · · · · · · · · · · · ·	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE PSTD	L DELETE	1.5 TITLE		Change Addition
NAME PUTNAM, CRAIG A STREET ADDRESS 480 PLANT AVENUE NE		1.2 NAME		
BALLA BANGE AGGET		1.3 STREET ADDRESS		
CITY-ST-ZIP PALM BAY FL 32907	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2 3 STREET ADDRESS		
CITY-ST-ZIP		2 4 City-St-Zip		
TITLE	DELETE	3 1 TITLE	THE STREET	☐ Change ☐ Addition
NAME		3.2 NAME		İ
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		4.4 CITY - ST - ZIP		
THLE	☐ DETEAT	5 1 TITLE		Change Addition
NAME PROFES ADDRESS		5.2 NAME		
STREET ADDRESS		5 3 STREET ADDRESS		
CITY - ST - ZIP	DELETE	5.4 CITY- ST- ZIP 6.1 TITLE		Change Addition
NAME		6.2 NAME		THE PROPERTY OF THE PROPERTY IN
STREET ADDRESS		6 3 STREET ADDRESS		
CITY-ST-ZIP		6 4 CITY-ST-ZIP	•	

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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 13 if changed, or on an altrachment with an address

SIGNATURE:

resident 2-8-98