Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90172 015 ***476.25

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000029067

1. Corporation Name

	R CONSTRUCTION, INC.		_							
Principal Place	of Business	Mailing Address								
1702 S. WASHIN TITUSVILLE FL		P. O. BOX 346 MIMS FL 32754-0346				DO NOT WRITE	: IN TUIC S	DACE		
		บร			⊢	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
							03/28/1997		····	
2. Principal Place of Business 2a. Mailing Address							4. FEI Number			lied For
3561	Industrial Road	26				59-3450512			Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			1	5. Certificate of Status Desired	X D	\$8.75 A		
22		27						Fee Rec	· 	
City & State		City & State				6. Election Campaign Financing	П	\$5.00		
Mims,	FL	28				Trust Fund Contribution	<u> </u>	Added to	Fees	
Zip	Country	Zip	Cour	ntry		İ	8. This corporation owes the current		ngible	.
24 32754-0346 25 USA 29 29			30	0			Personal Property Tax.			χNο
	9. Name and Address of Current	Registered Agent				1	0. Name and Address of New Re	gistered A	gent	
1501.0	ON TOCO A I		ļ	81	Name					
WILSON, FRED A. J				82 Street Address (P.O. Box Number is Not Acceptable)						
3561 INDUSTRIAL RD										
MIMS	S FL 32754			83						
		•	}	84	City				85 Zip C	ode
					•			FL		
11. Pursuant office or ragent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	or Florida, Such change was a ions of, Section 607.0505, Flo	orida Statu	ites.	ne corpo	orations	tion submits this statement for the p board of directors. I hereby accept	urpose of c the appoint	hanging its r ment as reg	egistered istered
	Signature, typed or printed name of registered agent OFFICERS AND		13.	Agent	signature re	required will	ADDITIONS/CHANGES TO OFFI		DIRECTOR	RS IN 12
12.	p OFFICERS AND	DELETE	1.1 TIT	1 F			7,551,101107011111020110 0711		☐ Change	Addition
TITLE	-			1.2 NAME						
NAME	WILSON, ROBIN			1.2 NAME 1.3 STREET ADDRESS						
STREET ADDRESS 3561 INDUSTRIAL RD.		•								
CITY-ST-ZIP	MIMS FL 32754		_	1.4 CITY-ST-ZIP 2.1 TITLE					☐ Change	Addition
TITLE	VP	☐ nere ie								
NAME	WILSON, FRED J			2.2 NAMÉ		l				
STREET ADDRESS			2.3 ST	2.3 STREET ADDRESS						
CITY-ST-ZIP	MIMS FL 32754 .		_	2.4 CITY-ST-ZIP			<u></u>		□ ct	Addition
TITLE	ST	☐ DELETE	3.1 गा	3.1 TITLE					Change	Addition
NAME	BLUA, RAMONA		3.2 NA	3.2 NAME						
STREET ADDRESS 3561 INDUSTRIAL RD.			3.3 ST	3.3 STREET ADDRESS		1				
CITY-ST-ZIP	MIMS FL 32754		3.4. CI	3.4. CITY-ST-ZIP						
TITLE	☐ DELETE		4,1 TIT	4.1 TITLE					☐ Change	Addition
NAME			4. 2 N	AME.						
STREET ADDRESS			4.3 STREET ADDRESS		;}					
CITY-ST-ZIP			4.4 CI	TY-ST	-ZIP_					
TITLE		☐ DELETE	5.1 TIT	LE			_		☐ Change	☐ Addition

CITY-ST-ZIP 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 supplemental annual report is told 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 toestee 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 apachment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NG OFFICER OR DIRECTOR

DELETE

3 Mar 1999

(407) 267-2341

☐ Addition