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 # P97000036816 (1)

PHUEN	IIX B UILDERS, INC.				
Principal Plac	e of Business	Mailing Address			8144 88440 8460 8460 19104 87918 8384 4884
2200 CORPORATE BLVD. N.W. SUITE 312 BOCA RATON FL 33431 2200 CORPORATE BLVD. N.W SUITE 312 BOCA RATON FL 33431 2200 CORPORATE BLVD. N.W			N.W.	DO NOT WRITE	E IN THIS SPACE
1				3. Date Incorporated or Qualified	7
2. Principal P	lace of Business	2a. Mailing Address		04/11/1997 4. FEI Number	Applied For
21		26		4, 12,110,1150	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		- Continue of Chalus Desired	\$8.75 Additional
22	· · · · · · · · · · · · · · · · · · ·	27	·	5. Certificate of Status Desired	Fee Required
City & State	В	City & State		6. Election Campaign Financing	\$5.00 May Be
23 7in	Country	28	Country	Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip	Country 30	8. This corporation owes or has pr	– • – •
24	g, Name and Address of Curre		30	Personal Property Tax due June 10. Name and Address of New Ro	
HC	RM CORP.		81 Name /	0	
	O CORPORATE BLVD NW, SU	ITF 401	82 Street Add	IMBERGO E. KUI	F
	CA RATON FL 33431	,,,,	311961-400	ress (P.O. Box Number is Not Accepta	カ チシノン
			83		
			84 City D	——————————————————————————————————————	85 Zip Code
			1 250	PCA/GATON	FI 6570/
11, Pursuant	to the provisions of Sections 607 05	502 aryl 607.1508, Florida Statute	is, the above-named corpora	poration submits this statement for the tition's board of directors. I hereby acce	purpose of changing its registered
agent. I a	m familiar with any accept the obli	gations of, Section 607.0505, Flor	rida Statutes.	mores board of directors. I horeby acco	pr the appointment as registered
1					
SIGNATURE	- Jums	/			411498
	Signature, typed or minted name of gistered a		. Registered Agent signature requ		DATE CERS AND DIRECTORS IN 12
	Signature, typed or minted name of gistered a	ND DIRECTORS DELETE	Registered Agent signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFI	
12.	Signature, typed or minted name of gistered a	ND DIRECTORS	13.		CERS AND DIRECTORS IN 12
12. TITLE	Signature, typed or frinted name of gustered OFFICERS A	ND DIRECTORS DELETE	13. 1.1 TITLE		CERS AND DIRECTORS IN 12
12. TITLE NAME	Signato, typed or finited have of distorted to OFFICE HS A D RUIZ, HUMBERTO E	NI) DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME		CERS AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS	OFFICERS A OR FICERS A OR FICERS A OR FULZ, HUMBERTO E 2200 CORPORATE PLVD, N	ND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		CERS AND DIRECTORS IN 12
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14. Thereby 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 supplicated 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 fire acceiver 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 or an attachment with an address.

CIONATURE.

HUMREAGNERUS 3

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FILED

Apr 23 1998 8:00am

Secretary of State