## 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

P97000037883 (0)

K.U. H/	AHHIS CONSTRUCTION, IN	IC.			
Principal Plac	ce of Business	Mailing Address	<del></del>		
3461 3RD AVENUE N.W.		3461 3RD AVENUE N.W	ſ		
NAPLES FL 34120		NAPLES FL 34120	1,		
		== • . =		DO NOT WRITE IN THIS S	SPACE
ļ				3. Date Incorporated or Qualified	
				04/23/1997	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0743527	Not Applicable
Suite, Apt.	. #, BtC.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27	· · · · · · · · · · · · · · · · · · ·		Fee Required
City & Stat	le.	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	<b>28</b>	Country	Trust Fund Contribution	Added to Fees
24	<b>├</b> ¬ ′	<u>├</u>	} <del></del>	8. This corporation owes or has paid the cur	_ ` _ `
[24]	25 9. Name and Address of Curre	29	30	Personal Property Tax due June 30.  10. Name and Address of New Registered A	
	<del></del>	III II Ografici Co Agoiti	81 Name	10. Hamid Bild Address of New Hogistered 2	
HARRIS, KUNALU U					
	B1 3RD AVENUE N.W.		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
j NA	PLES FL 34120		83		
			35		
			84 City	P-1	85 Zip Code
44 0	10 10 10 10 10 10 10 10 10 10 10 10 10 1	00 - 1007 1/00 51-1-1-01-		poration submits this statement for the purpose of	(-)
office or r agent. La	registered agent, or both, in the Stat me familiar with, and accept the oblig	e of Florida, Such change was	s authorized by the corpora	tion's board of directors. I hereby accept the app	ointment as registered
SIGNATURE	Signature, typed or proted have of registered as	new and tile diaroleable IN	OTF: Registered Agent signature requi	red when reinstating) DATE	
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	Ď	DELETE	1.1 1ITLE		Change Addition
NAME	HARRIS, RONALD D		1.2 NAME		
STREET ADDRESS	3461 3RD AVENUE N.W.		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 34120		14 CiTY-ST-ZIP		
TITLE		DELETE	21 10 LF		Change Addition
NAME			22 NAME		,
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		DEL ETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TIPLE		DELETE	4.1 TITLE		Change Addition
NAME		_	4. 2 NAME		_ ,
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY-ST-ZIP		
TITLE		DELETE	51 THILE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
ŀ			5.4 CITY - ST - ZIP		
CITY-ST-ZIP TITLE		☐ DFLETE	6.1 TITLE		Change Addition
NAME		C Private	6.2 NAME		sharps radicion
STREET ADDRESS	1		. 6.3 STREET ADDRESS		

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 supplienental 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:

-9<del>0</del> 941-455-2836

May 06 1998 8:00am

Secretary of State