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 # P97000061863 (1)

UNDERGROUND DIRECTIONAL COMPANY

FILED Feb 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					1 (\$01 001 ill (Bit) 100 1 00 11 00 11 00 11 00 11 00 11 100 11 100 11 100 11 100 11 100 11 100 11 100 11 100	
11315 MCMUL	LEN LOOP	11315 MCMULLEN LOOP				
RIVERVIEW FL 33569		RIVERVIEW FL 33569				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						07/15/1997 /
2. Principal Place of Business		2a. Mailing Address				4. FEI Number / Applied For
21		26				59-3958/02 Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Hequired
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country		Zip Country				This corporation owes or has paid the current year Intangible
		29	30			Personal Property Tax due June 30. Yes No
24	g. Name and Address of Curre		[30]	T		10. Name and Address of New Registered Agent
				B1	Name	
VINCENT, THOMAS 11315 MCMULLEN LOOP RIVERVIEW FL 33569					Street Add	dress (P.O. Box Number is Not Acceptable)
					82 Street Address (P.O. Box Number is Not Acceptable) 83	
				84	City	■■ 85 Zip Code
					-	FL `` '
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this stigment for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
Structure: Typed or printed name of registered agent and title it opplicable INOTE. Registered Agent agnetium required when reinstating).						
12.		ND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	D	☐ DEU		TITLE	1	Citalige Assumon
NAME	VINCENT, THOMAS			NAME		
STREET ADDRESS	11315 MCMULLEN LOOP				ADDRESS	
CITY - ST - ZIP	RIVERVIEW FL 33569	T DEL		CITY-ST	- ZIP	Change Addition
TITLE	D WEIGHOOF MATTHEW			NAME		Similar Communication
NAME	WEISKOPF, MATTHEW				ADDRESS	
STREET ADDRESS		Old Momocreit Edd.		CITY-S		
CITY-ST-ZIP TITLE	RIVERVIEW FL 33589	DEL		TITLE	1- &IF	Change Addition
NAME	SKALIOTIS, PHILLIP			NAME		-
STREET ADDRESS	15001 ELMCREST				ADDRESS	
CITY-ST-ZIP	ODESSA FL 33556			CITY-S		
TITLE	77270112 20000	DEL		TITLE	·	Change Addition
NAME			4. 2	NAME	N .	
STREET ADDRESS			4.3	STREET.	ADDRESS	
CITY-ST-ZIP			4.4	CITY-\$1	T-ZIP	
TITLE		DEL DEL	ETE 5.1	TITLE		Change Addition
NAME			52	NAME		
STREET ADDRESS			5.3	STREET	ADDRESS	
CITY-ST-ZIP				CITY-S	T-ZIP	
TITLE		☐ DEL	ETE 6.1	TITLE		Change Addition
NAME			6.2	NAME		
STREET ADDRESS			6.3	STREET	ADDRESS	
CITY-ST-ZIP			6.4	CITY - S		a Section 110 07(2Vi) Florida Statutes I further certify that the information

4. 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 of supplimental 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 appropriation 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 chapter 6, or on any illaurimout with an address.

SIGNATURE: Non Mine

1-15-98

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