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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9700063594

RIGHT WAY CONSTRUCTION & MANAGEMENT CORP.

Principal Place of Business	Mailing Address
7155 NW 74TH ST	7155 NW 74TH ST
MIAMLEL 33166	MIAMI FL 33166

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90042 031 ***150.00



MIAMI FL 33166 MIAMI FL 33166			DO NOT WRITE IN THIS SPACE						
					3. Date Incorporated or Qualifed 07/22/1997				
2 Principal Pt	ace of Business	2a. Mailing Address			4. FEI Number			Applied For	
21	26 -			65-0783743			Not Applicable		
	Suite, Apt. #, etc. Suite, Apt. #, etc.				T		\$8.75	Additional	
22	.,	27			5. Certifcate of Status Desired		Fee	Required	
City & State	•	City & State			6. Election Campaign Financing		\$5.0	O May Be	
23		28			Trust Fund Contribution			d to Fees	
Zíp	Country Zip Country				8. This corporation owes the curr	ent year Inta	ingible	-	
24	25)	29 30			Personal Property Tax. Yes No				
	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent								
<u> </u>			81	Name	USY D BOMBE				
TOLA	TOLAND, HOWARD S								
100	100 SE THIRD AVE			82 Street Address (P.O. Box Number is Not Acceptable)					
	E 1900	•	83	710	9 12 30 1 7 7 11				
	AUDERDALE FL 33394								
			84	City City	W AJ	FL	85 Zi	Code 3/KK	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508. Florida Statutes, the	e above	e-named corpo	oration submits this statement for the	purpose of			
office or re	egistered agent, or both, in the State of	f Florida, Such change was authorize	zed by	the corporation	n's board of directors. I hereby accep	ot the appoir	ntment as	registered	
agent. I ai	m familiar with, and accept the obligation	ons or, Section 607.0505, Plottoa Si	willes	•		7/1	210	2 Q	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Registe	ered Agen	t signature required	when reinstating)	DATE	<u>ں۔</u>		
12.	OFFICERS AND		3.		ADDITIONS/CHANGES TO OF	FICERS AN	D DIREC	TORS IN 12	
TITLE	D		1 TITLE				Chang	e	
NAME	ERMER, CHARLES D	13	2 NAME						
STREET ADDRESS	7155 NW 74TH ST	1:	3 STREET	ADDRESS				J	
CITY-ST-ZIP	MIAMI FL 33166		4 CITY-S					1	
TITLE	MINIMITE GOTOD		1 TITLE	·			Chang	e Addition	
NAME	**		2 NAME					į	
1 1			_	ADDRESS					
STREET ADDRESS		e ^e	4 CITY-S						
CITY-ST-ZIP			1 TITLE	1-21		· · · · · · · · · · · · · · · · · · ·	Chang	e	
1	,		2 NAME						
NAME				ADDRESS					
STREET ADDRESS			.3 STREET #: CITY-S						
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		#: CITY-5 .1 TITLE	11-215			Chang	ge Addition	
TITLE		_	2 NAME					_	
NAME	~,			ADORESS	-				
STREET ADDRESS									
CITY-ST-ZIP			4 CITY-S	1-411			Chang	e Addition	
TITLE			2 NAME						
NAME		i i		ADDRESS]	
STREET ADDRESS			.3 STREET .4 CITY-S						
CITY-ST-ZIP	<u> </u>		.1 TITLE	1-417			Chang	e Addition	
TITLE ' -""			2 NAME						
NAME				f ADODESS				ľ	
STREET ADORESS				ADORESS					
CITY-ST-ZIP		6.	.4 CITY- \$	T-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 supplemental 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, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR