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

PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name



DOCUMENT # P97000069434

FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

Mar 05, 1999 8:00 am Secretary of State **Katherine Harris**

03-05-1999 90104 044 ***150.00

M.L.K. C	CONSTRUCTION CORPORAT	TON							
Principal Plac	e of Business	Mailing Add	ress				. 1 10011000 110 10111 10311 30111 80111 40111 00110		JU (1511 3:0 : 1 40)
43 SOUTH BOUNTY LANE KEY LARGO FL 33037 43 SOUTH BOUNTY LANE KEY LARGO FL 33037							DO NOT WRITE IN THIS	SPACE	
							3. Date Incorporated or Qualifed 08/11/1997		
Principal Place of Business 2a. Mailing Address							4. FEI Number	A	Applied For
21 26							65-0773590		Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22		27	27				3. Certificate of Status Desired	- Fee F	tequired
City & Stat	e	City & S	City & State				6. Election Campaign Financing		0 May Be
23		28					Trust Fund Contribution		to Fees
Zip	Country	Zip		Cour	ntry		8. This corporation owes the current year In		~
24	25	29		30			Personal Property Tax.	Yes	7500
	9. Name and Address of Curren	t Registered Ag	ent		81	Name	10. Name and Address of New Registered	Agent	
FIT7	PATRICK, DENNIS J			j	01	Name		·	···
	KAUFMAN, ROSSIN & CO.				82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
	SOUTH BAYSHORE DRIVE				83				
				83					
******	MI FL 33133-5486				84	City	FL	85 Zip	Code
				E: Registered	Agent	t signature required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AI	ND DIRECT	ORS IN 12
12.	D OFFICERS AN		DELETE	1.1 TIT	1 F		ADDITIONAL MARKET TO OFFICERS A	Change	
TITLE NAME	EGLAND, LEE			1.1 III					
STREET ADDRESS	43 SOUTH BOUNTY LANE					ADDRESS			
	KEY LARGO FL 33037			1.4 CIT		1			
CITY-ST-ZIP TITLE	NET EAROUTE GOOD		☐ DELETE	2,1 TIT		1-21		Change	e Addition
NAME				2.2 NA					
STREET ADDRESS						ADORESS	- ·		
CITY-ST-ZIP		•	,	2. 4 CI			الله الأراب المنظمة المنافقة ا	الماريسينية ب	م د جمعت
TITLE			DELETE	3.1 TIT				☐ Change	Addition
NAME				3.2 NA	ME			*	
STREET ADDRESS				3.3 ST	REET	ADDRESS			
CITY-ST-ZIP				3.4. CI	TY-S	T-ZIP			
TITLE			DELETE	4.1 TIT	LE			Change	Addition
NAME				4, 2 N/	ME			:	
STREET ADDRESS				4.3 ST	REET	ADDRESS			
CITY-ST-ZIP				4.4 CI	Y-S1	T-ZIP			
TITLE			☐ DELETE	5.1 TIT		1		☐ Change	e Addition
NAME				5.2 NA					
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP			——————————————————————————————————————	5.4 CIT		T-ZIP		C 0:	
TITLE			☐ DELETE	61 TIT				Change	e 🗌 Addition
NAME				6.2 NA					
STREET ADDRESS						ADDRESS	•		
CITY-ST-ZIP				6.4 CI	Y-ST	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.