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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P97000070455 (5) FOREST HILL CONTRACTING CORP. Principal Place of Business Mailing Address 12773 W FOREST HILL BLVD 12773 W FOREST HILL BLVD SUITE 207 SUITE 207 DO NOT WRITE IN THIS SPACE WELLINGTON FL 33414 WELLINGTON FL 33414 3. Date Incorporated or Chalified 08/14/1997 2. Principal Place of Business 2a, Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 30 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 BEER, JERALD S 515 N FLAGLER DR 82 Street Address (P.O. Box Number is Not Acceptable) 19TH FLOOR 83 WEST PALM BEACH FL 33401 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement 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 a	am tamiliar with, and accept the obligations of, Section	607.0505, Flore	da Statules.			
SIGNATURE	Signature, typod or printed name of registered agent and tille if applicable,	(NOTE: E	Rog-sterod Agent signature r	nguited when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13,		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	KELLEY, J. THOMAS		1.2 NAME			
STREET ADDRESS	12773 W FOREST HILL BLVD SUITE 207		1.3 STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL 33414		1.4 CITY-ST-ZIP			
TITLE		DELETE	2 1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY - ST - ZIP			
TITLE		DELETE	3.1 TITLE	<u> </u>	☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADDRESS		,	3.3 STREET ADDRESS			
CITY-ST-ZIP			3 4. CITY - ST - ZIP			
TITLE		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	5.1 TITLE		Change Addition	
NAME			5.2 NAME		XA //	
STREET ADDRESS			5.3 STREET ADDRESS		$4/h \Omega/v$	
CITY-ST-ZIP			5.4 CITY - ST - ZIP		YY) = 7]	
TITLE		DELETE	61 TITLE	9000024		
NAME			6.2 NAME	1125 - 125 -		
STREET ADDRESS			6.3 STREET ADDRESS	-02/12/9801	פוטרדווט.	
City-ST-7IP			6.4 CITY - ST - ZIP	***317.S0		

14. Thereby certify that the information supplied with this filip of 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 of the report of the tree of the report of the corporation of the report of the report

SIGNATURE:

1/23/98 561 790-2

FILED

Feb 11 1998 8:00am

Secretary of State

CR2E034 (10/97)