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**

P97000071935 (5) DOCUMENT #

I.M.R. CONSTRUCTION MANAGEMENT SERVICES, INC.

Principal Place of Business 5787 W SUNRISE BLVD

Mailing Address

5787 W SUNRISE BLVD

FILED Apr 29 1998 8:00am Secretary of State



☐ Change

☐ Addition

PLANTATION FL 33313 PLANTATION FL 33313 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/19/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 <u>65-0775703</u> 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State Cily & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TURNER, OTHEL 5787 W SUNRISE BLVD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33313 84 Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PSTD DELETE TITLE 1.1 TITLE ☐ Change Addition TAYLOR, JOHNNY C SR NAME 1.2 NAME **5787 W SUNRISE BLVD** STREET ADDRESS 1.3 STREET ADDRESS **PLANTATION FL 33313** CITY-ST-ZIP 1.4 CITY - S1 - ZIP ☐ DELETE TITLE 21 TITLE Change Addition MCCARTHY, HYLTON NAME 2.2 NAME 5787 W SUNRISE BLVD STREET ADDRESS 2 3 STREET ADDRESS **PLANTATION FL 33313** CITY-ST-ZIP 2.4 City-St-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE Change 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. I hereby certify that the information sul-indicated on this annual apport or sulfi-officer or director of the curporation of Block 12 or Block 13 if changed, of an chalify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an dered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with this filing does not or tal annual report is true or driver or trustee empower

5.4 City-S1-7IP

6.3 STREET ADDRESS

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