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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortinatio

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000072967 (7)

BYYOU BUILDERS, INC.

Principal Place of Business

Mailing Address

FILED Apr 30 1998 8:00am Secretary of State



151 NORTH 7TH ST. SANTA ROSA BEACH FL 32459		151 NORTH 7TH ST. SANTA ROSA BEACH FL 32459			
witte noon	PERIOTI I & PETER	VARIA HOUA DENVIT (E 92	700		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					08/22/1997
2. Principal Place of Business 2a. Mailing Add			res\$		4. FEI Number Applied For
21	N - 24.	26			59-347056 3 Not Applicable
Suite, Apt.	#, 6 1C.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
City & State		City & State			Fee Required
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	7 _(p)	Country	,	This corporation owes or has paid the current year Intangible
24	25	29 30	~ ·		Personal Property Tax due June 30. Yes No
	9, Name and Address of Current		·		10. Name and Address of New Registered Agent
- BLA	NR, MELISSA D		81	Name	
151 NORTH 7TH ST.			82	Stroot	Address (P.O. Box Number is Not Acceptable)
	NTA ROSA BEACH FL 32459		02	300007	Address (F.O. Box Number is Not Acceptable)
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			83		
-	•		84	City	85 Zip Code
			04	City	FL 85 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
Signature, typed or profest name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE.					
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12
TITLE	DT TO DAY TO A	DELETE	1.1 TITLE		NO CONTROL OF THE PROPERTY OF
NAME	BLAIR, DAVID A		1.2 NAME		ALL MAN LONG THE SHOP OF THE S
STREET ADDRESS	151 NORTH 7TH ST.		1.3 STREET		
CITY-ST-ZIP	SANTA ROSA BEACH FL 3245		1.4 CITY - S	T-ZIP	The same Addition
TITLE	V	☐ DELETE	2.1 TITLE		Change Addition
NAME	LEWIS, DENZILL L		2.2 NAME		
STREET ADDRESS	RT. 3, BOX 790N	•	2.3 STREET ADDRESS		
CITY-ST-ZIP	FREEPORT FL 32433		2.4 CITY-ST-ZIP		Change Addition
TITLE	BLAIR, JAMES W		3.1 TITLE		Cikelife Ci Maulion
NAME	151 NORTH 7TH ST.	THEER	3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS	SANTA ROSA BEACH FL 3245	, ,		i	
CITY-ST-ZIP	SHITIA HUSA DEAUTI FL 3295			S1-7IP	☐ Change ☐ Addition
TITLE			4.1 TITLE 4.2 NAME		C onange C Addition
NAME STREET ADDRESS			4.2 NAME	Annacée	
STREET ADDRESS			4.4 CITY - S		
CITY-ST-ZIP TITLE			5.1 TITLE	11-216	Change Addition
NAME		and occur	5.2 NAME		
STREET ADDRESS			5.3 STREET	ADDRESS	
CITY-ST-ZIP				1	
TITLE	_	☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME	- 1	- · · · · · · · · · · · · · · · · · · ·
STREET ADDRESS			6.3 STREET	ADDRESS	
CITY-ST-ZIP			64 City- 9		
14. I hereby o	ertify that the information supplied with	h this filing does not qualify for t	he exemp	tion state	d 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 changest, or on an attachment with an address.					