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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000087262 (6)

AAA DESIGN / BUILD, INC.

FILED Mar 04 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address			1 18411944 114 18111 18811 80115 #EIFF 891	11 9 10 1 10 11 10 10 110 110 1	Britt LIE 1881
902 E. BLOUN	T STREET	P.O. BOX 30664				•	
PENSACOLA F	L 32503	PENSACOLA FL 32503	PENSACOLA FL 32503		DO NOT WRITE IN THIS SPACE		
					3. Date incorporated or Qualified	IN THIS SPACE	
					10/08/1997		
9 Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	<u>-</u>	Applied For
ii	ace of business	26			# 593479035		Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				\$8.7	5 Additional
2	.,,	27			5. Certificate of Status Desired	Fee	Required
City & State)	City & State			6. Election Campaign Financing	\$5.0	00 May Be
3		28			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Country		8. This corporation owes or has pa	id the current year	Intangible
4	25	29	30		Personal Property Tax due June		□ No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
MA	BIRE, MICHAEL		81	Name			
902 E. BLOUNT STREET			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
PEN	ISACOLA FL 32503						
			83				*
			84	City		85 Z	ip Code
				•		FL	
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig Stanature, typed or printed name of registered ag	e of Florida. Such change was pations of, Section 607.0505, Fl	authorized by orida Statutes	the corporat	tion's board of directors. I hereby accepted when relinations	DATE	
office or r agent. I a	egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered age	e of Florida. Such change was pations of, Section 607.0505, Florent and tille if applicable. (NOT	authorized by orida Statutes	the corporat	red when reinstating)	DATE	
office or r agent. I a SIGNATURE	egistered agent, or both, in the State or familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS AN	o of Florida. Such change was pations of, Section 607.0505, Florida and tile if applicable (NO) ID DIRECTORS	authorized by orida Statutes E. Registered Age	the corporat	tion's board of directors. I hereby accept	DATE CERS AND DIRECT	FORS IN 12
office or r agent. I a SIGNATURE 12.	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered as OFFICERS AN PSTD	e of Florida. Such change was pations of, Section 607.0505, Florent and tille if applicable. (NOT	authorized by orida Statutes E. Registered Age 1.1 TITLE	the corporat	red when reinstating)	DATE	FORS IN 12
office or r agent. I a SIGNATURE 12. TITLE	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered as OFFICERS AN PSTD MABIRE, MICHAEL	o of Florida. Such change was pations of, Section 607.0505, Florida and tile if applicable (NO) ID DIRECTORS	authorized by orida Statutes E. Registered Age 13. 1.1 TIBLE 1.2 NAME	the corporat	red when reinstating)	DATE CERS AND DIRECT	FORS IN 12
office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered as OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET	o of Florida. Such change was pations of, Section 607.0505, Florida and tile if applicable (NO) ID DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME	nt signature require	red when reinstating)	DATE CERS AND DIRECT	FORS IN 12
office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered as OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503	o of Florida. Such change was pations of, Section 607.0505, Florida and tile if applicable (NO) ID DIRECTORS	authorized by orida Statutes E Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CIY-S	nt signature require	red when reinstating)	DATE CERS AND DIRECT	FORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered as OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD	e of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DIRECTORS DELETE	E Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE	nt signature require	red when reinstating)	DATE DERS AND DIRECT	FORS IN 12
office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS : CITY-ST-ZIP TITLE	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered as OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L	e of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DIRECTORS DELETE	authorized by orida Statutes E Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CIY-S	the corporat	red when reinstating)	DATE DERS AND DIRECT	FORS IN 12
office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS : CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered as OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD	e of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DIRECTORS DELETE	E Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET	nt signature requirements ADDRESS 1- ZIP	red when reinstating)	DATE DERS AND DIRECT	FORS IN 12
office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS : CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	e of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DIRECTORS DELETE	E Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME	nt signature requirements ADDRESS 1- ZIP	red when reinstating)	DATE DERS AND DIRECT	PRS IN 12 ge Addition ge Addition
office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS : CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DD DIRECTORS DELETE	E Repistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S	nt signature requirements ADDRESS 1- ZIP	red when reinstating)	DATE DERS AND DIRECT Chan	PRS IN 12 ge Addition ge Addition
office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DD DIRECTORS DELETE	E Repistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE	ADDRESS 1- ZIP ADDRESS 11- ZIP	red when reinstating)	DATE DERS AND DIRECT Chan	TORS IN 12 ge Addition ge Addition
office or regent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DELETE) DELETE DELETE	E Repistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME	ADDRESS ST-ZIP ADDRESS ADDRESS	red when reinstating)	DATE DERS AND DIRECT Chan	TORS IN 12 ge
office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DD DIRECTORS DELETE	IE Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 2.4 CITY-S 3.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET	ADDRESS ST-ZIP ADDRESS ADDRESS	red when reinstating)	DATE DERS AND DIRECT Chan	TORS IN 12 ge
office of agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DELETE) DELETE DELETE	E Repistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S	ADDRESS ST-ZIP ADDRESS ADDRESS	red when reinstating)	DATE DERS AND DIRECT Chan	TORS IN 12 ge
office of agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DELETE) DELETE DELETE	E Repistered Age 13.	ADDRESS 11-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	red when reinstating)	DATE DERS AND DIRECT Chan	ORS IN 12 ge
office of regent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DELETE) DELETE DELETE DELETE	E Repistered Age 13.	ADDRESS 1- ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	red when reinstating)	DATE CERS AND DIRECT Chan	FORS IN 12 ge
office of regent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DELETE) DELETE DELETE	E Repistered Age 13.	ADDRESS 1- ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	red when reinstating)	DATE DERS AND DIRECT Chan	FORS IN 12 ge
office of regent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DELETE) DELETE DELETE DELETE	E Repistered Age 13.	ADDRESS 1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP	red when reinstating)	DATE CERS AND DIRECT Chan	FORS IN 12 ge
Office of agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DELETE) DELETE DELETE DELETE	E Repistered Age 13.	ADDRESS 1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP	red when reinstating)	DATE CERS AND DIRECT Chan	FORS IN 12 ge
Office of agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tille if applicable (NOT DELETE) DELETE DELETE DELETE DELETE	E Repistered Age 13.	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	red when reinstating)	DATE DERS AND DIRECT Chan Chan	FORS IN 12 ge
Office or a gent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tilk if applicable (NOT DELETE) DELETE DELETE DELETE	E Repistered Age 13.	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	red when reinstating)	DATE CERS AND DIRECT Chan	FORS IN 12 ge
Office of a gent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tille if applicable (NOT DELETE) DELETE DELETE DELETE DELETE	E Repistered Age 13.	ADDRESS 1- ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	red when reinstating)	DATE DERS AND DIRECT Chan Chan	FORS IN 12 ge
office of agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State m familiar with, and accept the oblig Signature typed or printed name of registered ag- OFFICERS AN PSTD MABIRE, MICHAEL 902 E. BLOUNT STREET PENSACOLA FL 32503 VD USENBEE, WARREN L 902 E. BLOUNT STREET	of Florida. Such change was pations of, Section 607.0505, Florida and tille if applicable (NOT DELETE) DELETE DELETE DELETE DELETE	E Repistered Age 13.	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	red when reinstating)	DATE DERS AND DIRECT Chan Chan	FORS IN 12 ge