PROFIT	(A. C.	FLORIDA DEPARTMENT OF STATE		FILED	•
CORPORATION ANNUAL REPOR	A B Co. 1 A ATOM		n e Harris y of State	99 SEP 14 AM 9: 19	
1999		DIVISION OF	CORPORATIONS		
DOCUMENT # 1. Corporation Name	P98000047	286		BALE-BASEE. PLONIDA	
G & H BUILDERS, II					
					IDDIA KARA MULI AKO MULI
Principal Place of Business	Mail	ing Address			140/6 (1664 (29/6 B))) 168)
829 E MAGNOLIA DRIVE 829 E MAGNOLIA DRIVE TALLAHASSEE FL 32301 TALLAHASSEE FL 32301					
TACCATAGGEL TE GEGOT	IALL	AIMOGEE I E GEGO!		DO NOT WRITE IN THIS SPA	ACE
				05/27/1998	
2. Principal Place of Business	þenning -	Mailing Address		4. FEI Number	Applied For Not Applicable
21 Suite, Apt #, etc	26	Suite, Apt. #, etc.		5. Certificate of Status Desired	8.75 Additional
City & State	27	City & State			Fee Required
23	28			Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 25	Country Z	?ip	Country 30	8. This corporation owes the current year Intangible Personal Property.	′es ∏ No
	Address of Current Register	red Agent		10. Name and Address of New Registered Age	
GREEN, ALBERT G	}		81 Name		
829 E MAGNOLIA				Iress (P.O. Box Number is Not Acceptable)	
TALLAHASSEE FL	32301		83		
			84 City	┡┖╵	35 Zip Code
11. Pursuant to the provisions office or registered agent	of sections 607.0502 and 607 or both implie State of Florida	.1508, Florida Statute . Such change was a	s the above-named corputhorized by the corpora	oration submits this statement for the purpose of chang- tion's board of directors. I hereby accept the appointment	ing its registered ant as registered
agent Lam familiar with SIGNATURE	and accept the obligations of,	section 607.0505, Flo	rida Statutes.	9/14/59	
Signature, typed or pri	nted name of registered agent and title if a OFFICERS AND DIREC		Till Registered Agent signature re	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS IN 12
Treside	rt.	DELETE	1.1 TITLE		Change Addition
STREET ADDRESS & 20 FM	. Green		1.2 NAME 1.3 STREET ADDRESS		
CTYSTZ# Tallah	estre H 32	301	1.4 CITY-ST-ZIP		
MANY KEA HO	1.	DELETE	2.1 TITLE 2.2 NAME		Change Addition
STREET ADDRESS 16152 1	tighwan 84 E		23 STREET ADDRESS	6000029921 -09/21/9901	053004 1 366
CITY-ST-716 Thomas	10the Ga 3175	7	2.4 CiTY-ST-ZiP		**** <u>\$50.00</u>
THE NAME		DELETE	32 NAME	니	Change
STREET ADDRESS			3.3 STREET ADDRESS		
CITYSTZP		DELETE	3.4 CITY-ST-ZIP		Change Addition
NAME			4.2 NAME		
STREET ADDRESS CITY-ST ZIF			4.3 STREET ADDRESS 4.4 City-St-Zip		
TITLE		DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREE LADDRESS CITY STIZIP			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME EXHIBIT AND COLUMN			6.2 NAME 8.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby certify that the info indicated on this annual rep	rmation supplied with this filing port or supplemental annual re-	does not qualify for the	e exemption stated in se ate and that my signature	ction 119.07(3)(i), Florida Statutes. I further certify that to shall have the same legal effect as if made under oa equired by Chapter 607, Florida Statutes; and that my	the information th; that Lam
an officer or director of the in Block 12 or Block 13 if cl	corporation or the receive) of the hanged of an an attachment w	rustee empowered to /ith an address.	execute this report as re	equired by Chapter 607, Florida Statutes; and that my	nameres
SIGNATURE:	1/20 HOT.	hir.		9/14/99 912-22	5-1428
			OF DIRECTOR		