SECOND NOTICE: CORPORATION VIILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

⁻1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000048637

FILED Sep 21, 1999 8:00 am Secretary of State

09-21-1999 90001 032 ***550.00

i. Corporation Name								
L.H. SMITH CONSTRUCTION CO.								
							1 20 1 1 2 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2	
Principal Place of Business			Mailing Address					
7204 C.R. 48 YALAHA FL 34797			7204 C.R. 48					
TALATIA FL 34/9/		IAL	TALANA PE 34787				DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualified	
							06/01/1998	
2. Principal Place of Business		2a. M	2a. Mailing Address				4. FEI Number Applied For	
21		26	<u> </u>				59-3514057 Not Applicable	
Suite, Apt. #, etc.		├	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State		27	City & State				6. Election Campaign Financing \$5.00 May Be	
23		28					Trust Fund Contribution Added to Fees	
Zip			Count	У		8. This corporation owes the current year		
24	25 29 30		30			Intangible Personal Property. Yes No		
Name and Address of Current Registered Agent					41 54		10. Name and Address of New Registered Agent	
SMITH, LUK	Œ H			8	1 Name			
7204 C.R. 48						Street Address (P.O. Box Number is Not Acceptable)		
YALAHA FL 34797								
	,			8				
	;			8	4 City		FL 85 Zip Code	
11. Pursuant to the pr	ovisions of sections 607.0502	and 607.	1508, Florida Statute	s, the abov	e-named	corpora	ation submits this statement for the purpose of changing its registered	
office or registere agent. I am famili	d agent, or both, in the State ar with, and accept the obliga	of Florida itions of, s	. Such change was a section 607.0505, Flo	utnorizeo i rida Statut	y ine con es.	poration	n's board of directors. I hereby accept the appointment as registered	
SIGNATURE								
Signature, t	yped or printed name of registered agent OFFICERS ANI			TE: Registered	Agent signat	ure require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	OPPICERS AN	DINECT	DELETE	1.1 TITLE		P	S, T Change Addition	
NAME			0222.6	1.2 NAMI	:		KE H. SMITH	
STREET ADDRESS				1.3 STRE	ET ADDRESS	720	94 C.R. 48	
CITY-ST-ZIP				1.4 CITY		YAL	AHA, FL 34797	
TITLE		_	DELETE	2.1 TITLE			Change Addition	
NAME				2.2 NAM	=			
STREET ADDRESS				•	ET ADDRESS			
CITY-ST-ZIP				2.4 CITY- 3.1 TITLE		+	Tob Taldina	
TITLE			L DELETE	3.1 111LE			Change Addition	
NAME				1	ET ADDRESS			
STREET ADDRESS				3.4 CITY				
CITY-ST-ZIP TITLE				971 971	~			
			DELETE	4.1 TITLE			Change Addition	
NAME			DELETE	4.1 TITLE 4.2 NAM			Change Addition	
NAME STREET ADDRESS			DELETE	4.2 NAM			Change Addition	
			DELETE	4.2 NAM	ET ADDRESS		Change Addition	
STREET ADDRESS			DELETE	4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE	ET ADDRESS ST-ZIP		Change Addition	
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STREET ADDRESS CITY-ST-ZIP TITLE				4.2 NAMI 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE	ET ADDRESS ST-ZIP			
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		-	☐ DELETE	4.2 NAM 4.3 STRE 4.4 CITY: 5.1 TITLE 5.2 NAM 5.3 STRE 5.4 CITY: 6.1 TITLE 6.2 NAM	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	and the second	Change Addition	

14. I hereby certify that the information supplied with this filing 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 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 changed, or on an attachment with an address.

SIGNATURE:

(352) 324 2500