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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000066365

Corporation Name

PARHAM CONSTRUCTION INC.

PANNAW CONSTRUCTION, II	10.			
Principal Place of Business	Mailing Address			
5617 N.W. 79TH WAY PARKLAND FL 33067	5617 N.W. 79TH WAY PARKLAND FL 33067			
Principal Place of Business The Principal Place of Business The Principal Place of Business	2a. Mailing Address			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			
City & State	City & State			

Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90005 017 ***150.00

			_			
Principal Place	e of Business	Mailing Address				
5617 N.W. 79TH		5617 N.W. 79TH WAY				
PARKLAND FL	33067	PARKLAND FL 33067				DO NOT WRITE IN THIS SPACE
H:						3. Date Incorporated or Qualifed 07/27/1998
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				(05-085386 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27	_			5. Certificate of States Desired Fee Required
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Coul	ntry		8. This corporation owes the current year Intangible Personal Property Tax Personal Property Tax
24	25	29	30		<u> </u>	Personal Property Tax. Li Yes Li No 10. Name and Address of New Registered Agent
	9. Name and Address of Currer	n Registereu Agent		81	Name	IV. Inditité delle Adultess of Inew Achisteres Affent
DUR	ROW DUKER & ASSOCIATES, P	⁾ .A.				
	UNIVERSITY DRIVE	• •		82	Street Add	dress (P.O. Box Number is Not Acceptable)
	IAL SPRINGS FL 33065		}	83		
				00		
				84	City	FL 85 Zip Code
	to the previous of Continue 607.055	22 and 607 1509 Florida Statut	os the at		n named con	poration submits this statement for the purpose of changing its registered
office or r agent. I a SIGNATURE	m familiar with, and accept the obliga	ations of, Section 607.0505, Flo	rida Statu	ites.		red when reinstating) DATE
40	Signature, typed or printed name of registered age	ND DIRECTORS	13.	Ayon	it signature requir	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D	DELETE	11 111	LE		Change Addition
NAME	PARHAM, JILL		1.2 NA		İ	
STREET ADDRESS	FOAT \$1144 TOTAL 184434				T ADDRESS	
CITY-ST-ZIP	PARKLAND FL 33067		1,4 CIT			
TITLE		DELETE	2.1 TIT		1	☐ Change ☐ Addition
NAME			2.2 NA	мЕ		
STREET ADDRESS			2.3 ST	REET	TADDRESS	
CITY-ST-ZIP			2. 4 CI	TY-S	ST-ZIP	
TITLE		☐ DELETE	3.1 TIT			☐ Change ☐ Addition
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 ST	REET	T ADDRESS	•
CITY-ST-ZIP			3.4. CI	TY-S	ST-ZIP	
TITLE		☐ DELETE	4.1 TIT	LE		Change Addition
NAME			4, 2 N	ME		
STREET ADDRESS			4.3 ST	REET	TADDRESS	}
CITY-ST-ZIP			4.4 CII	TY- \$1	T-ZIP	
TITLE		☐ DELETE	5.1 717	LE		☐ Change ☐ Addition
NAME			5.2 NA	ME	İ	•
STREET ADDRESS			5.3 ST	REET	TADDRESS	
CITY-ST-ZIP			5.4 CII		T-ZIP	
TITLE		☐ DELETE	6.1 TIT	LE		☐ Change ☐ Addition
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 ST	REET	T ADDRESS	

6.4 CITY-ST-ZIP CITY-ST-ZIP 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, with all other like empowered.

SIGNATURE: