


**FILED**  
**Apr 19, 1999 8:00 am**  
**Secretary of State**

04-19-1999 90025 006 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> <b>Secretary of State</b> <b>DIVISION OF CORPORATIONS</b>
--	---	---

**DOCUMENT # P98000071574**

1. Corporation Name

**ST. GEORGE CONSTRUCTION INC.**

Principal Place of Business

**200 S.W. 2ND STREET  
DEERFIELD BEACH FL 33441**

Mailing Address

**200 S.W. 2ND STREET  
DEERFIELD BEACH FL 33441**

DO NOT WRITE IN THIS SPACE

<b>2. Principal Place of Business</b> <b>21 1031 SW 6 WAY</b> Suite, Apt. #, etc.		<b>2a. Mailing Address</b> <b>26 1081 SW 6 WAY</b> Suite, Apt. #, etc.		<b>3. Date Incorporated or Qualified</b> <b>08/12/1998</b>	
<b>22</b> City & State <b>23 DEERFIELD BEACH</b>		<b>27</b> City & State <b>28 DEERFIELD BEACH</b>		<b>4. FEI Number</b> <b>65. 0753125</b> Applied For <input type="checkbox"/> Not Applicable	
<b>24 33441</b> Zip <b>25 BROWARD</b> Country		<b>29 33441</b> Zip <b>30 BROWARD</b> Country		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> <b>6. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> Trust Fund Contribution	
<b>9. Name and Address of Current Registered Agent</b> <b>ALLEYNE, RALPH</b> <b>200 S.W. 2ND STREET</b> <b>DEERFIELD BEACH FL 33441</b>				<b>10. Name and Address of New Registered Agent</b> <b>81 Name RALPH ALLEYNE</b> <b>82 Street Address 1031 SW 6 WAY</b> <b>83</b> <b>84 City DEERFIELD BEACH FL</b> <b>85 Zip Code 33441</b>	

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 R. Alleyne **RALPH ALLEYNE** DATE 04/11/99  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> DELETE <b>RALPH ALLEYNE (PRESIDENT)</b> <b>1031 SW 6 WAY</b> <b>DEERFIELD BEACH FL 33441</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>1.1 TITLE</b> <b>1.2 NAME</b> <b>1.3 STREET ADDRESS</b> <b>1.4 CITY-ST-ZIP</b>	<b>ST. GEORGE CONSTRUCTION INC.</b> <b>1031 SW 6 WAY</b> <b>DEERFIELD BEACH FL 33441</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> DELETE <b>RALPH ALLEYNE (SECRETARY)</b> <b>1031 SW 6 WAY</b> <b>DEERFIELD BEACH FL 33441</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>2.1 TITLE</b> <b>2.2 NAME</b> <b>2.3 STREET ADDRESS</b> <b>2.4 CITY-ST-ZIP</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> DELETE <b>RALPH ALLEYNE (TREASURER)</b> <b>1031 SW 6 WAY</b> <b>DEERFIELD BEACH FL 33441</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>3.1 TITLE</b> <b>3.2 NAME</b> <b>3.3 STREET ADDRESS</b> <b>3.4 CITY-ST-ZIP</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>4.1 TITLE</b> <b>4.2 NAME</b> <b>4.3 STREET ADDRESS</b> <b>4.4 CITY-ST-ZIP</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>5.1 TITLE</b> <b>5.2 NAME</b> <b>5.3 STREET ADDRESS</b> <b>5.4 CITY-ST-ZIP</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>6.1 TITLE</b> <b>6.2 NAME</b> <b>6.3 STREET ADDRESS</b> <b>6.4 CITY-ST-ZIP</b>	

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: R. Alleyne **RALPH ALLEYNE** DATE 04/11/99 (954) 5708411  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)