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 # P98000107277

CONSTRUCTION, TRADING & LABOR INC.

			<i>-</i>								
Principal Place of Business Mailing Address							1,121,121,131,131,131,131,131,131,131,13				
5656 CHASE CT.			5656 CHASE CT.								
WEST PALM BEA	ACH FL 33415	WEST PALM	WEST PALM BEACH FL 33415				DO NOT WRITE IN THIS SPACE				
							3. Date incorporated or Qualifed				
							12/24/1998				
2 Principal P	lace of Business	2a. Mailing	Address	_			4. FEI Number			Арр	lied For
21		26					G5-08866	3.33		Not	Applicable
Suite, Apt.	#. etc.								\$8.	75 A	ditional
22	.,	- 27					5. Certificate of Status Desired		F	e Req	wired ——
City & State			City & State				6. Election Campaign Financing		\$5	.00	May Be
23		28					Trust Fund Contribution			lded to	
Zip	Country	Zip		Coul	ntry		8. This corporation owes the curre	ent year Int			_
24	25 29 30		30			Personal Property Tax.		Z Yes	<u>; </u>]No	
	9. Name and Address of Cur	rent Registered A	gent				10. Name and Address of New R	egistered	Agent		
			_		81	Name					
	TKE, CHRISTOPHER		}			Street Addre	fress (P.O. Box Number is Not Acceptable)				
	CHASE CT.					Olicerridate	SS (F. C. BOX (Maines) to the Free Property	,			
WEST	PALM BEACH FL 33415			l	83						
					- 1				Toel	Zip C	ode
				Ì	84	City		FL	85	Zip O	oue .
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was authoragent. I am familiar with, and accept the obligations of, Section 607.0505, Florida 					DΥ	the corporation	ration submits this statement for the o's board of directors. I hereby accep	ourpose of t the appoi	changir ntment	ng its r as regi	egistered istered
SIGNATURE	Signature, typed or printed name of registered	count and title if analizable	(NOTE	· Registered	Agen	nt signature required	when reinstating)	DATE			
12.		AND DIRECTORS	<u> </u>	13,	ngoi	it anginatoro roquitos	ADDITIONS/CHANGES TO OFF	ICERS AN	ND DIRE	CTOF	RS IN 12
TITLE	PSD		☐ DELETE	1.1 TIT	ι£				Ch:		Addition
NAME	LEDUTKE, CHRISTOPHER			1.2 NA	ME						
	5656 CHASE CT.					TADDRESS					
	WEST PALM BEACH FL 334	is		1.4 CIT							
CITY-ST-ZIP TITLE	VPTD	<u> </u>	DELETE	2.1 711		1-211			Chi	ange	Addition
	LEDUTKE, TANJA			2.2 NA							
NAME	5656 CHASE CT.					TADDRESS					
1	1	46									
CITY-ST-ZIP	WEST-PALM BEACH FL 334	10	☐ DELETE	2. 4 CI		01-4F			Chi	ange	Addition
TITLE				3.2 NA					_	-	_
NAME				L		TADDRESS					
STREET ADORESS						T ADDRESS					
CITY-ST-ZIP			☐ DELETE	3.4. CI 4.1 TIT		51-ZIP			☐ Chi	ange	Addition
TITLE											
NAME				4. 2 N							
STREET ADDRESS						TADDRESS					
CITY-ST-ZIP			Operate	4.4 CT		T-ZIP			Chi	2000	Addition
TITLE			☐ DELETE	5.1 TIT						unge	
NAME				5.2 NA							
STREET ADDRESS						T ADDRESS					
CITY-ST-ZIP			<u> </u>	54 CF		IT-ZIP					
TITLE			☐ DELETE	6.1 TI					☐ Ch	ange	Addition
NAME				6.2 NA							
OTDEET ADDRESS				6.3 ST	REE	T ADDRESS					

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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP



FILED May 24, 1999 8:00 am Secretary of State

05-24-1999 90021 045 ***150.00