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

PROFIT
CORPORATION
ANNUAL REPORT
1997

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S01231

WELLS CONSTRUCTION SERVICE, INC.

(7)

FILED											
Jun 05 1997 8:00am											
Secretary of State											

Change

\_\_\_ Addition

Principal Place of Business Mailing Address  1081 NE 43RD COURT 1081 NE 43RD COURT FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33								-					
									3. Date incorporated or Qualified 09/20/1990		Date of Last		
2. Principal Place of Business				2a. Mailing Address					4. FEI Number Applied I				
21				26					65-0215590		1	Vot Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional	
22				City & Clate								Required	
City & State				City & State					6. Election Campaign Financing			May Be	
Zip Country				Zip Country					Trust Fund Contribution		· · · · · · · · · · · · · · · · · · ·	d to Fees	
24	25					····· y		8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes				s. 199.032,	
64	stered Agent	1001					ss of New Registered Agent						
WE	LS, LEROY G					81	Name						
	1 NE 43RD CO			82 Street Addres			ss (P.O. Box Number is Not Accepta	ble)		···· ··· ·· · · · · · · · · · · · ·			
FT.	LAUDERDALE												
						83							
						84	City				85 Zip	Code	
11. Pursuant to the provisions of Sictions 607,0502 and 617.1508, Florida Statutes, the											FL  °°   ''		
office or r	egistered agent	or both, in the State of and appept the opligat	Flori	ia. Such change was a	es, the a authorize	d by	the corp	oratio	ration submits this statement for the in's board of directors. I hereby acce	purpos pl the	appointment a	is registered	
	m tamiliar with.	and appept the obligat	<b>P</b> nt/	f, ection 607.0505, FIG	orida Sta	ivtes	1.0.		VI MC	٠ ، ۲	29.9	1	
SIGNATURE	Signalure, moed er o	in our of well egent	and title	If applicable (NOT	YOU'S ROGISTON		nt signature r		when reinstating)	DA'	TE	<i></i>	
12.		FFICERS AND	DIRE		13.		<del>-</del>		ADDITIONS/CHANGES TO OFFI	CERS	AND DIRECTO	ORS IN 12	
TITLE	DP.	$\supset$		DELETE	1.1 1	TLE					☐ Change	☐ Addition	
NAME	WELLS, LEF				1.2 N	AME	ļ						
STREET ADDRESS	1081 NE 43				1.3 S	TREET	ADDRESS						
CITY-ST-ZIP		The state of the s					T - ZIP					——————————————————————————————————————	
TALE	JOHANCSIK, LAWRENCE JR DELETE 211						İ				☐ Change	Addition	
NAME .		•			22 N		ŀ						
STREET ADDRESS	1081 NE 43 FT LAUDER				•		ADDRESS						
CITY-ST-ZIP	ST CAUDEN	MULTE		DELETE	3.1 Ti		ST - ZIP				Change	Addition	
NAME	•	10010				3.2 NAME					CT onlinge		
STREET ADDRESS	1081 NE 43				1		ADDRESS						
CITY-ST-ZIP	EF LAUDEDDALE EL					3.4. CITY - ST - ZIP							
TITLE						4.1 TITLE					Change	Addition	
NAME	i.	4.			4.21	4. 2 NAME							
STREET ADDRESS					4.3 S	FREET	ADDRESS						
CITY-ST-ZIP				, , , , , , , , , , , , , , , , , , ,		IY-S	T-ZIP		,				
TITLE				☐ DELETE	5.1 Ti						☐ Change	Addition	
NAME					5.2 N								
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP					5.4 C	TY-S	T-ZIP						

14. I do hereby certify that the information supplied with this filing does not qualify for the exemplion 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.

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

Caro MALLON Alin Walle entine 52990 acres 200