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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # S02098

(9)

COLE'S CONSTRUCTION SERVICES, INC.

## **FILED** Apr 13 1998 8:00am Secretary of State



						-		
Principal Place of Business Mailing Address							, 0.0 0.0 0.0	
4799 SKATES	CIRCLE	4798 SKATES CIRCLE						
FT. MYERS FL 33905		FT. MYERS FL 33905			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified		
						08/23/1990		
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				65-0333128		Not Applicable
Suite, Apt. (	t, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional
22		27				<b>3</b> . Oct.	Fee	Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution		00 May Be
23		Z <sub>ID</sub> Country			•	770007070707070707		ed to Fees
Zip	Country	Zip	30	nitry		<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	e current year	No No
24	25    Name and Address of Curre	29   ent Registered Agent	[30]	I		10 Name and Address of New Regist		<del>*************************************</del>
001	LE, GINA			81 N	Vame	10.	<del></del>	-
	8 SKATES CIRCLE				74 A al alua	(D.O. Day Mumbas in Not Assentable)		
	MYERS FL 33905		82 Street Ac			ess (P.O. Box Number is Not Acceptable)		İ
LI MICHO LE 20200				83				
					nu		lee!	Zip Code
				1 1	City			
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 Signature, typed or printed name of registered agent and time if applicable (NOTE: Registered Agent signature required when reinstating)  DATE								
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	TORS IN 12
TITLE	PD	☐ DELETE	1.1 Ti	ITLE			Chan	
NAME	COLE, GINA		1.2 N	AME				;
STREET ADDRESS	4798 SKATES CIRCLE		1.35	TREET AD	DRESS			li
CITY-ST-ZIP	FT MYERS FL		1.4 C	ITY-ST-Z	ZIP			
TITLE	D	DELETE 2.1		ITLE			☐ Chan	ge 🔲 Addition 🖣
NAME	COLE, RONALD L.		2.2 N	2.2 NAME				
STREET ADDRESS	4798 SKATES CIRCLE		2.3 S	TREET AD	DRESS	· •		
CITY-ST-ZIP	FT MYERS FL			CITY-ST-	ZIP			
TITLE		☐ DELETE 3.1					☐ Char	ige L. Addition
NAME			3.2 N					İ
STREET ADDRESS				TREET AD				
CITY-ST-ZIP		DELETE		CITY-ST-	ZIP		☐ Char	ige Addition
TITLE		ר"ו מנונונ	4.1 T 4.21					A LINGUIGH
HAME				NAME TREET AD	ADDECC.			İ
STREET ADDRESS				ITY-ST-				
CITY-ST-ZIP TITLE		☐ DELETE	5,1 T		ZIF		Char	ige Addition
NAME			5.2 N					
STREET ADDRESS				TREET AD	ODRESS			l
CITY-ST-ZIP				STY-ST-				l
TITLE		DELETE	6.1 T				☐ Char	nge Addition
NAME			6.2 N	AME				1
STREET ADDRESS			6.3 S	TREET AC	DDRESS			
CITY-ST-ZIP				XTY-ST-				
	autile, that the information or male of	Luste this filing door not qualit				Section 119 07(3)(i) Florida Statutes, I furt	her certify that	the information

Thereby certify that the information supplied with this litting does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the informatic 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.