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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

FILED

May 04 1998 8:00am

Sandra B. Mortham

ANNUAL REPORT 1998		Secretary DIVISION OF CO		Secretary of State	
1. Corporatio	MENT # S0446 FRAME CONTRACTING, INC.	(.)			
		Mailing Address		i ibdirben ili nalit debil debih delih Kil	4 BJEST ALDIT ATEIT BIBIT BIBIT BIBIT 1881
2101 NW 33RD ST. 200		2101 NW 33RD ST. 200			
POMPANO BEACH FL 33069 US		POMPANO BEACH FL 33069 US		DO NOT WRITE IN 3. Date Incorporated or Qualified 10/08/1990	1 THIS SPACE
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Sulte, Apt.	# Alc	Suite, Apt. #, etc.		65-0220814	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	е	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Country		Added to Fees
24	25	29 30	_	This corporation owes or has paid Personal Property Tax due June 36	
	g. Name and Address of Current			10. Name and Address of New Regis	
WALDMAN, JAMES W. 7000 W. PALMETTO PARK ROAD, SUITE 409 82			82 Street Addre	STEVEN A. BELSO SS (P.O. Box Number is Not Acceptable	
BOCA RATON FL 33433			62	NSBANK BLDG.	
			84 City	GLADES RD. SUITE	
BOCA RATON FL 3343)					
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 the original statutes.					
SIGNATURE Signature type of privilegating and titled agriculation (NOTE: Registered Agent signature required when reinstating) DATE					
12,	OF LICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	5.112
TITLE	PTD	☐ DELETE	1.1 TITLE		Change Addition
NAME ATTECT LIBERTS	FITZGIBBON, ROBERT	00	1.2 NAME		
STREET ADDRESS CITY-ST-ZIP	2101 NW 33RD ST., SUITE 20 POMPANO BEACH FL	JU	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE	VSD	DELETE	2.1 TITLE		Change Addition
HAME	gaines, andrew M.		2.2 NAME		
STREET ADDRESS	2101 NW 33RD ST., SUITE 20	00	2.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL	DELETE	2. 4 CITY - ST - ZIP	····	
TITLE NAME	, V Decicco, John	□ DEFERE	3.1 TITLE 3.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	2101 NW 33 ST., STE 200		3.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BCH. FL		3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TIFLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		-
STREET ADDRESS			5.3 STREET ADDRESS	,	
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP		Change Addition
NAME			6.1 TITLE 6.2 NAME		☐ Change ☐ Addition
STREET ADDRESS		ļ	63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		
14. Thereby 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 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 decerter 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 op an adachinent with an address.					

ANDREW GAINES, V.P. 1/5/98 (954) 979-9998