CORP ANNUA	NOW: FILING FE ROFIT ORATION AL REPORT 996	FLORI	DA DEPARTMEN Sandra B. Morth Secretary of St SION OF CORPO	FOF STATE nam ate		
DOCUM 1. Corporation N			(8)			
ANDEVA	AT CONSTRUCTION, IN				1 (22/10/2 (1) 3 (1) (22/1) 3 (1)	
Principal Place of Business Mailing Address 1017 SW 19TH STREET 1017 SW 19TH STREET					r santræse til kaltu indfil fødië ålfå.	BITA OLDIT ETRIT BIĐIS ĐIĐIS ĐIĐIS ĒSĒSS 1001
FT. LAUDERDAL US	.E FL 33315	FT. LAUDERD				
O Dringing Div	40			·	3. Date Incorporated or Qualified 10/23/1990	3a. Date of Last Report 05/01/1995
 Principal Place 		2a. Mailing Adda 26	ress		4. FEI Number 65-0226541	Applied For Not Applicable
Suite, Apt. #, ε	etc.	Suite, Apt. #	, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip 24	Country 25	Zip 29	30 Co	untry	8. This corporation has liability for in	ntangible tax under s 199.032,
	9. Name and Address of Curr		30	04	Florida Statutes Yes 10. Name and Address of New R	No egistered Agent
ANDEWAY,				81 Name 82 Street Add	ress (P.O. Box Number is Not Acceptable	2)
	19TH STREET RDALE FL 33315			83	ess (1.0. Dox Number is Not Acceptable	ы
0.000	HDALE I E 00013			84 City		los 7- 0- 1-
11. Pursuant to the	ne provisions of Sections 607.05	02 and 607.1508. Florid	a Statutes, the ab	We-named corpor	ration submits this statement for the purp	FL 85 Zip Code
or registered a familiar with, a	agent, or both, in the State of Fig and accept the obligations of, Se	orida. Such change was action 607,0505, Florida	authorized by the Statutes.	corporation's boar	rd of directors. I hereby accept the appo	intment as registered agent. I am
	ature typed or printed name of registered ag	ent and title if applicable	(NOTE: Registere	d Agent signature require	d when reinstating)	DATE
12.	OFFICERS A	AND DIRECTORS	13, ETE 1.1	TITLE	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12
	ANDEWAY, JEFFREY			AME		CERS AND DIRECTORS IN 12 Change Addition
	1017 SW 19TH ST FT. LAUDERDALE FL			TREET ADDRESS		
TITLE	THE HOPE THE	☐ DELE		ITY-ST-ZIP		Change C Addition
NAME			2.2 N	ANG		[Change] Addition C
6705(1.1600000			•	I .		Change Addition
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CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereby cercify that the certify that the	an officer or director of the corr ck 12 or Block 13 if charged, o	DELE	23S 24C 3.11 32 N 33.5 34 C TE 4.11 42 N 43 S 44 C 1E 5.17 52 N 53 S 54 C 1E 6.17 62 N 63 S1 64 C 17 17 17 17 17 17 17 17 17 17 17 17 17	IREET ADDRESS ITY-ST-ZIP ITLE AMME TREET ADDRESS ITY-ST-ZIP ITLE AMME ITREET ADDRESS ITY-ST-ZIP ITLE MME REET ADDRESS ITY-ST-ZIP ITLE MME REET ADDRESS ITY-ST-ZIP ITLE MME REET ADDRESS ITY-ST-ZIP ITLE IME IME IME IME INTERIOR ADDRESS ITY-ST-ZIP ITLE IME INTERIOR ADDRESS ITY-ST-ZIP ITTUE AND ADDRESS ITY-ST-	or the exemption stated in Section 119.0 e and that my signature shall have the surport as required by Chapter 607, Fior	Change Addition Change Addition Change Addition Change Addition Change Addition