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Mar 06, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$38861

1. Corporation Name

KRUGER CONSTRUCTION CORP.

Principal Place of Business Mailing Address							019 100 11101 10101 101	H	OLOH BIBIL BIBIL O	411 41811 1481
6695 N. US 1		6695 N U. S. 1	-							
VERO BEACH FL 32967		VERO BEACH FL 32967								
US US		US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
						3. Date Incol		ieo		Į
A Principal C	lace of Business	2a, Mailing Address				4. FEI Numb			Apr	olied For
-	lace of Busilless	<u> </u>	2a. Mailing Address			65-0245				Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.	te, Apt. #, etc.						\$8.75 A	
22		27	7			Certifcate	of Status Desire	d 🗆	Fee Re	
City & State		City & State				6. Election C	ampaign Financ	ing _	\$5.00	May Be
23		28				**	Contribution	a 🗆	Added to	• 1
Zip	Country	Zip	r—			8, This corpo	oration owes the	current year Ir		_
24	25 29 30			, <u>-</u>			Property Tax.			□No
	9. Name and Address of Curre	ent Registered Agent				10. Name and	d Address of Ne	w Registered	l Agent	
1/DI I	CED RDIAN D		81	Na	me					
KRUGER, BRIAN D. 6980 77TH STREET			82	. Str	eet Addres	ess (P.O. Box Number is Not Acceptable)				
	D BEACH FL 32967		<u> </u>							
*LI!	DEACHTE GESCI		83	'						
			84	Cit	у			F	85 Zip C	ode .
44 Durauant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statut	es the abov	e-nan	ned comor	ation submits th	nis statement for	the purpose of	of changing its	registered
office or re	egistered agent, or both, in the State	e of Florida. Such change was a	uthorized by	the c	orporation	s board of dire	ctors. I hereby a	ccept the appo	ointment as reg	istered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Fig.	rida Statute:	S.						ļ
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE	: Registered Age	nt signa	ture required v	hen reinstating)		DATE	•	 }
12.		ND DIRECTORS	13.		· · ·	ADDITIONS	S/CHANGES TO	OFFICERS A	ND DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE						☐ Change	Addition
NAME	KRUGER, BRIAN D.		1.2 NAME							Ì
STREET ADORESS	6980 77TH STREET		1.3 STREE	T ADDR	ESS					
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-	ST-ZIP						
TITLE	D	☐ DELETE	2.1 TITLE		İ				Change	Addition (
NAME	KRUGER, JULIA LYNN		2.2 NAME							
STREET ADDRESS	6980 77TH STREET		2.3 STREE	T ADDR	ESS			· .:		
CITY-ST-ZIP	VERO BEACH FL		2.4 CITY-	ST-ZIP				4	Change	Addition
TITLE	M	☐ DELETE	3.1 TITLE						☐ Change	☐ Addition
NAME	HOMAN, JOHN W.		3.2 NAME							
STREET ADDRESS	480 13TH PL SW		3 3 STREE		ESS					
CITY-ST-ZIP	VERO BEACH FL 32962	☐ DELETE	3.4. CITY-	ST-ZIP		., .,			☐ Change	Addition
TITLE			4.1 TITLE							
NAME			4. 2 NAME		F00					
STREET ADDRESS			4.3 STREE		E35					
CITY-ST-ZIP		☐ DELETE	4.4 CITY-5		+				☐ Change	Addition
TITLE NAME			5.1 TITLE 5.2 NAME							_ "
STREET ADDRESS			53 STREE		ESS					
			5.4 CITY-							
CITY-ST-ZIP TITLE		☐ DELETE	6 1 TITLE		+				☐ Change	Addition
NAME		_	6.2 NAME							
STREET ADDRESS			6 3 STREE	T ADDR	ESS					
,			6.4 CITY-1	ST-ZIP						

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTEN NAME OF SIGNING OFFICER OR DIRECTOR

561-569-5496 Daytime Phone #