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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$54471

(5)

NEW CONSTRUCTION CLEAN UP, INC.

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Principal Plac	e of Busines	S	M	Mailing Address					a inditions the divite density theory can divit belief divit density density and the profit density for the contractions of the contraction of the co			
4411 BEE RIDGE ROAD SUITE 221 SARASOTA FL 34233				4411 BEE RIDGE ROAD SUITE 221 SARASOTA FL 34233-2514								
BAHASOIA PL	34233		NG.	MASOIA FL 34	1200-2014				3. Date Incorporated or Qualific	ri   30 De	ite of Last	Ranorl
			,			<del></del>			05/20/1991		1/1996	
2. Principal F	Place of Busin	ness		. Mailing Addr	ress				4. FEI Number			opplied For
Suite, Apt. #, etc.				26					65-0306276			lot Applicable
<u> </u>	. ₩, Θ(C.		<del> </del>	Suite, Apl. #, etc.					5. Certificate of Status Desired			Additional Regulred
City & Stat	10	<del></del>	27	City & State		<del></del> .			<del>                                     </del>			
23			28	Oily & Olate					6. Election Campaign Financing Trust Fund Contribution			May Be I to Fees
Zip		Country		Zip		Country			8. This corporation has liability f	er int de milete		
24		25	29	- 1,5	30	า	,		Florida Statutes		lax under ☐ No	5. 199.032,
	9. Name	and Address of Cur		stered Agent	130	'J			10. Name and Address of New			
NIK	A, BOB			·		81	Na	me				
	1 BEERIDGI	F RD #221				\ <u></u>	1		do o New Land	(- (- 1- )		
	ASOTA FL					82	Str	eet Addre	ess (P.O. Box Number is Not Accep	(able)		
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						84	Cit	У		FL	85 Zip	Code
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office or I	regi <b>ste</b> red ag	gent, or both, in the St	ate of Flori	da. Such chan	ige was auth	orized by	y the	corporati	oration submits this statement for th on's board of directors. I horoby ac	cept the app	ointment a	s registered
i agent. La	am familiar w	ith, and accept the ob	oligations of	f, Section 607.	.0505, Florid	a Statute	s.					
SIGNATURE	Stageture Lance	or printed name of registered	annut av ditati-		MOTE O	mint secol A c			ed when reinstating)	DATE		
12.	signature, typec	OFFICERS			(NC) E. FO	13.	ent sige	ature regoin	ADDITIONS/CHANGES TO OF		DIRECTO	BS IN 12
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CITY-ST-ZIP						6.4 CITY - S	ST-ZIP					

14. I do 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, go on an attachment with an address.

CIGNATURE.

4-20-97

278-4153