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 # V04211

(1)

PIPELINE CONSTRUCTION, INC.

Principal Place of Business	Mailing Address				
SS MERLIN COURT	35 MERLIN COURT				
CASSELBERRY FL 32707	CASSELBERRY FL 32707-4548				

FILED Jul 15 1997 8:00am Secretary of State



35 MERLIN COURT CASSELBERRY FL 32707		35 MERLIN COURT CASSELBERRY FL 32707-4548							
						3. Date Incorporated or Qualified 12/23/1991	3a. Date of Last 05/01/1996		
	lace of Business	2a. Mailir	2a. Mailing Address			4. FEI Number	^	applied For	
21		26				59-3097359	· · · · · · · · · · · · · · · · · · ·	lot Applicable	
Suite, Apt. #, etc.		Suite. 27	Suite, Apt. #, etc.			5. Certificate of Status Dosired Status Desired Fee Required			
City & State	מ	City 8	3 Stato			6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution		I to Fees	
·	Zip Country		Zip Country		1	8. This corporation has liability for intengible tax under s. 199.032,			
24	25	29		30		Florida Statutes	Yes No		
	9. Name and Address of Cu	rrent Registered	Agent		1 ·	10. Name and Address of New Re	gistered Agent		
	en, richard b			81	Name				
525	0 S HIGHWAY 17-92			82	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
CAS	SELBERRY FL 32707					·			
				83					
				84	City		OF Zin	Code	
,				67	City		FL B5 Zip	Code	
11. Pursuant	to the provisions of Sections 607	.0502 and 607.150	8, Florida Statutes	s, the abov	e-named co	poration submits this statement for the p	urpose of changing	its registered	
office or re	egistered agent, or both, in the 5 m familiar with, and accept the c	State of Florida, Suc Iblications of Sect	ch change was au ion 607 0505. Flori	ilhorized b ida Statute	y the corpora	ation's board of directors. I hereby accept	t the appointment as	s registered	
	arrana way and decept the s	ionganoris or, cook	1011 001 .00001 11011	note Gianate	u.				
SIGNATURE	Signature, typed or printed name of registers	d agent and title it applies	alde (NO1E:	Registered Ac	ent signature requ	uired when reinstating)	L'ATÉ		
12.	OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	RS IN 12	
TITLE	PTD		DELETE	11111111			Change	Addition	
NAME	DAVIS, STEVEN MICHAEL			1.2 NAME	ĺ				
STREET ADDRESS	35 MERLIN COURT				ADDRESS				
CITY-ST-ZIP	CASSELBERRY FL			1.4 CITY-	1				
TITLE	VSD		DELETE	2.1 TILLE	21-71		Change	Addition	
NAME	DAVIS, ANGELA N						Onlings	L_ Noutrain	
į	35 MERLIN COURT			2.2 NAME	1 10000000				
STREET ADDRESS				1	ADDRESS				
CITY+ST-ZIP	CASSELBERRY FL		DELETE	2. 4 CITY-	\$1-7iP		Channa	- Laddican	
TITLE			L_] Utit it	3 1 THLE			Change		
NAME				3 2 NAME					
STREET ADDRESS				3.3 \$1REE	FADDRESS				
CITY-ST-ZIP				3.4. C(1)	ST-ZIP				
TITLE			☐ DELFTE	4.1 HILE			∐ Change	☐ Addition	
NAME				4 2 NAME					
STREET ADDRESS				4.3 STREE	ADDRESS				
CITY-ST-2IP				4.4 CHY-	ST-ZIP				
TITLE			DELETE	5 1 TRLE			Change	Addition Addition	
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREE	ADDRESS				
CITY-ST-ZIP				5.4 CITY-	S1-ZIP				
TITLE			DELETE	6.1 1111.6			☐ Change	Addition	
NAME				6.2 NAME	}		·		
STREET ADDRESS					I ADDRESS				
CITY-ST-ZIP				6.4 CITY-					
	ov certify that the information sur-	nlied with this film	n does not qualify			ed in Section 119.07(3)(i). Florida Statutes	Liturther certify tha	Lthe	

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 eath; 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.

CHATURE A SOURCE THE OUR COLORS

7/9/97 400) 696-2079