

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

FILED  
Mar 05 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # V36958 1. Corporation Name TOM PYCHE CONSTRUCTION CORP.	(9)
--	-----

Principal Place of Business 2802 N. HABANA AVENUE TAMPA FL 33607	Mailing Address 2802 N. HABANA AVENUE TAMPA FL 33607
--	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 6416 N. Gomez Ave. Suite, Apt. #, etc. 22 City & State 23 Tampa, Fl. 33614 Zip 24 33614	2a. Mailing Address 25 6416 N. Gomez Ave. Suite, Apt. #, etc. 27 City & State 28 Tampa, Fl. 33614 Zip 29 Hillsborough 33614
---	---

3. Date Incorporated or Qualified 05/19/1992	4. FEI Number 59-3524746	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> X	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent PYCHE, TOM 2802 N. HABANA AVE. TAMPA FL 33607	10. Name and Address of New Registered Agent 81 Name Same 82 Street Address (P.O. Box Number is Not Acceptable) 6416 N. Gomez Ave. 83 84 City Tampa
--	--

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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	D PYCHE, TOM 2802 N. HABANA AVE. TAMPA FL
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	D PYCHE, NATALIE 2802 N. HABANA AVE. TAMPA FL
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	D PYCHE, TOM 1401 PINETREE CIRCLE WIMAUMA FL
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	D PYCHE, SHARON 1401 PINETREE CIRCLE WIMAUMA FL
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	D HARTE, JOSEPH 8507 ORANGEVIEW AVE TAMPA FL
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE Pres.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	TOM PYCHE
1.3 STREET ADDRESS	6416 N. Gomez Ave.
1.4 CITY-ST-ZIP	TAMPA, FL. 33614
2.1 TITLE V. Pres.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	THOMAS PYCHE
2.3 STREET ADDRESS	1401 PINETREE CIRCLE
2.4 CITY-ST-ZIP	WIMAUMA, FL 33598
3.1 TITLE Secretary/V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	NATALIE PYCHE
3.3 STREET ADDRESS	6416 N. GOMEZ AVE.
3.4 CITY-ST-ZIP	TAMPA, FL.
4.1 TITLE Treasurer	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	SHARON PYCHE
4.3 STREET ADDRESS	1401 PINETREE CIRCLE
4.4 CITY-ST-ZIP	WIMAUMA, FL. 33598
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	JOSEPH HARTE
5.3 STREET ADDRESS	8507 ORANGEVIEW AVE.
5.4 CITY-ST-ZIP	TAMPA, FL.
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	700002448787
6.3 STREET ADDRESS	-03/06/98--01006--013
6.4 CITY-ST-ZIP	***158.75

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.

SIGNATURE \_\_\_\_\_ 7/22/99 033-5410

CR2E034 (10/97)