| FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 | | | | | | FILED Apr 14 1997 8:00am | | | |
|--|--|-------------------------------------|---|--|---|--|-----------------------------------|----------------------------|----------------------------|
| COF ANNL | PROFIT CORPORATION ANNUAL REPORT 1997 | | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS | | | Secretary of State | | | |
| | MENT # V581 | 82 | (9) | | | | | | |
| • | ESSEL CONSTRUCTION | | X -7 | | | | | | |
| | | | | | | | ti tida tida t Si tida tida ti | ulu atan dian Manjarah | |
| rincipal Place of Business Mailing Address 55 WEBBER ST. 2455 WEBBER ST. IRASOTA FL 34239 SARASOTA FL 34239-4745 | | | | | | | | | |
| | | | | | | Date Incorporated or Qualified 08/01/1992 | | ite of Last R 23/1996 | eport |
| Principal P | lace of Business | 2a. 1 26 | Mailing Address | | ······ | 4. FEI Number 65-0351709 | | | plied For of Applicable |
| Suite, Apt | #, etc | 27 | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | | Additional |
| City & Staf | e | | City & State | | | 6. Election Campaign Financing Trust Fund Contribution | | \$5.00 Added | May Be to Fees |
| Zip | Country 25 | | Zip | Couri 30 | try | 8. This corporation has liability for Florida Statutes | or intangible | tax under s | |
| | 9. Name and Address of C SEL, THOMAS J. | | ared Agent | | I Name | 10. Name and Address of New I | | | , |
| | 5 Webber St. Asota Fl 34239 | | | | 13 14 City | fress (P.O. Box Number is Not Accept | FL | 65 Zip | Code |
| Pursuant office or r agent. La GNATURE | to the provisions of Sections 60 registered agent, or both, in the rm familiar with, and accept the Signature, spector protot name of registe | State of Florida obligations of, | a. Such change wa Section 607.0505. | as authorized , Florida Statu | by the corpora tes. | poration submits this statement for the tion's board of directors. I hereby acc | purpose of ept the app DATE | changing it ointment as | registered |
| | | S AND DIRECT | | 13. | | ADDITIONS/CHANGES TO OFF | | | |
| E Me EET ADDRESS In CL. 200 | WESSEL, THOMAS J. 4102 MACAULAY LANE SARASOTA FL | | | | | | | | |
| <u>-st-zip</u> E IE EFT ADDRESS | DV WESSEL, PATRICE M 4102 MACAULAY | | DELETE | 2.1 TITE 2.2 NA | E | | | Change | Addition |
| - <u>51 - ZiP</u> | SARASOTA FL | | DELETE | 2 4 CIT 3 1 TIT | Y-ST-ZIP E | | | Change | Addition |
| e Tel aduress (| | | | | IE EET ADDRESS Y - ST - ZIP | | | | |
| - ST- ZIP | | | DELETE | 4.1 BTI | E | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | Change | Addition |
| ET ADDRESS | | | | | EET ADDRESS | | | | |
| - ST- 7IP E IE EE1 ADDRESS | | | DELETE | 5.1 TITE 5.2 NA |) | | | Change | Addition |
| - \$1-21P F | | | DELETE | | (-ST-ZIP | | | Change | Addition |
| EET ADDRESS | | | | | IE EET ADDRESS (-ST-ZIP | | | | |
| intermedic | by certify that the information su in indicated on this annual repo filteer or director of the corporat in Block 12 or Block 13 if charge | at or eventered | titel approal report | 6.3 STR 6.4 CIT Ualify for the e | EET ADDRESS (-ST-ZIP xemption state | ed in Section 119.07(3)(i), Florida Stati at my signature shall have the same le ort as required by Chapter 607, Florida | and offerst as | s if made up | dar aath |

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Dale

941-3/15-1145 Daytime Phone #