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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Mar 07 1997 8:00am

Secretary of State

813-238-8988

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V62735

(8)

ANDRE CONSTRUCTION, INC.

ANDIE OOM										
Principal Place of Bus	siness	Mailing Address					HOURT BIRTH BIRTH BI			
121 W JEAN ST										
						3. Date Incorporated or Qualified 09/08/1992	3a. Date of 04/12/1		port	
2. Principal Place of Business 28. Mailing Address						4. FEI Number			olied For	
21 12   U	1. Jean St.	26				59-3159795			Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27								Fee Req	75 Additional se Required	
City & State  City & State  City & State  28						6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
<sup>Zip</sup> 24 33604	Country 25 U.S.	Ζφ <b>29</b>	30 Co	untry			Yes No	)	199.032,	
	lame and Address of Current	Registered Agent		81		10. Name and Address of New Re	gistered Agen	<u>t</u>		
PRANKLIN, ANUNE					Name					
TAMPA FL 33604				Street Addre	ss (P.O. Box Number is Not Acceptat	ole)				
				83						
				84	City		FL 85	Zip C	ode	
11. Pursuant to the p office or register agent. I am famil	provisions of Sections 607.0502 agent, or both, in the State of a with unid accept to obligat  Walker Hua	of Florida. Such change was tions of Section 607.0505.7	authorize Jorida Sta	id by ti tutes.	the corporation	oration submits this statement for the points board of directors. I hereby acceptions	ot the appointm	nging its ient as r	registered egistered	
Signeties 12.	Type dior printed name of registered agent OFCICEDS AND		TE Registere	ed Agent	signature require	d when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE SERS AND DIR	ECTORS	IN 12	
TILE P	OF IGENS AND	OFFICERS AND DIRECTORS 13.		ITLE		ADDITIONS/BITAINGES TO CITTO	***************************************	hange	Addition	
-	NKLIN, ANDRE		1.2 N	IAME				-		
STREET ADDRESS 121	W JEAN ST		1.3 \$	TREET AL	DDRESS					
CITY-ST-ZIP TAM	IPA FL			1.4 City-St-ZiP						
THILE		DELETE		2.1 TITLE			LJ €	Change	Addition	
MAME			2.2 N							
STREET ADDRESS			1	TREET AC	- 1					
TITLE		DELETE	3.1 T	CITY-ST-	-214			Change	Addition	
NAME		-	3.2 N					•		
STREET ADDRESS			3.3 5	TREET AL	DORESS					
CITY-ST-ZIP			3.4.	CITY-ST-	- ZIP					
TITLE		☐ DELETE	4.1 T	ITLE				Change	Addition	
NAME			4. 2	NAME						
STREET ADORESS			4.3 8	TREET A	DORESS					
City - S1 - ZiP			4.4 0	ITY-ST-	ZIP					
TITLE		☐ DELETE	5.1 T	TLE				Change	Addition Addition	
NAME			5.2 N	AME	- 1					
STREET ADDRESS					ı					
CITY -S1 - 7/2			5.3 8	TREET A	DDRESS					
	·····		5.40	TY-ST			· · · · · · · · · · · · · · · · · · ·			
TIFLE		☐ DELETE	5.4 C 6.1 T	XTY-ST∙ ITL€		Manager Politic Action Control Control		Change	Addition	
TITLE NAME		☐ DELETE	5.4 0 6.1 7 6.2 N	TY-ST	ZIP			Change	Addition	

14. I do hereby certily 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