

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

FILED

May 18 1998 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # **V73943** (5)
1. Corporation Name
KONRADY CONSTRUCTION COMPANY, INC.



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| Principal Place of Business 3010 S.W. 14TH PLACE., #10 BOYNTON BEACH FL 33426 | Mailing Address 3010 S.W. 14TH PLACE., #10 BOYNTON BEACH FL 33426 |
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DO NOT WRITE IN THIS SPACE

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| 2. Principal Place of Business 21 215 SE 8th Avenue Suite, Apt. #, etc. 22 City & State 23 Boynton Beach, FL Zip 24 33435 | | 2a. Mailing Address 26 215 SE 8th Avenue Suite, Apt. #, etc. 27 City & State 28 Boynton Beach Zip 29 33435 | | 3. Date Incorporated or Qualified 10/22/1992 | |
| | | 4. FEI Number 65-0364933 | | Applied For Not Applicable | |
| | | 5. Certificate of Status Desired <input type="checkbox"/> | | \$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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | |

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| 9. Name and Address of Current Registered Agent KONRADY, THOMAS K 3010 S.W. 14TH PLACE #10 BOYNTON BEACH FL 33426 | | 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 215 SE 8th Avenue 83 84 Boynton Beach FL 85 Zip Code 33435 | |
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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 *[Signature]* DATE **4/29/98**
(NOTE: Registered Agent signature required when reinstating)

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|------------------------------------------------|-------------------------------------------------------------------------------------------|------------------------------------------------------------|------------------------------------------------------|
| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD KONRADY, THOMAS K 3010 S.W. 14TH PLACE., #10 BOYNTON BEACH FL 33426 | 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP | 215 SE 8th Avenue Boynton Beach, FL 33435 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP | |

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: *[Signature]* President 4/29/98 (561) 369-3773
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)