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 # 499426

(5)

FILED Feb 04 1997 8:00am Secretary of State

	ration Name	,
HDS	CONSTRUCTION COMPANY	

Principal Place	ce of Business	Mailing Address		- i radivi ardia ratia talis drafa stata diri ardis bibli brafi drafi drafi drafi dibit (602				
	de Leon Blyd.	2121 PONCE DE LEON BLVD.						
SUITE 1050	PA FI 80161	SUITE 1050						
CORAL GABLES FL 33134 CORAL GABLES FL 33134-5218					_			
***************************************				3. Date Incorporated or Qualified 03/19/1976	3a. Date of Last Report 08/29/1996			
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For			
	LE JEUNE ROAD	26 P.O. BOX 14-1167		59-1659595	Not Applicable			
Suite, Apt.	E 202	Suite, Apt. #, etc.		5. Certificate of Status Desired	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required			
City & Stat	te	City & State		Election Campaign Financing \$5.00 May Be				
23 CORA	LGABLES, FLORIDA	28 CORAL GABL	BS, FLORIDA	Trust Fund Contribution	Added to Fees			
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,			
24 3313	11	29 33114-1167 3	0 05		Yes No			
	g, Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent				
	NANDEZ, RODOLFO, JR		81 Name	HERNANDEZ, RODOLFO:	TR.			
2121 PONCE DE LEON BLVD				dress (P.O. Box Number is Not Acceptable	6)			
	TE 1050		83	151 LE JEUNE ROAD	** · · · · · · · · · · · · · · · · · ·			
CORAL GABLES FL 33134			" 5	UITE 202				
				PRAL GABLES	FL 85 Zio Code 33134			
11. Pursuant	to the provisions of 80 stion, 607,9592	ap 1607.1508, Florida Statutes	the above-named co	poration submits his statement for the pu	rpose of changing its registered			
11. Pursuant to the provisions of 87 from 607,9502 and 607,1508, Florida Statutes, the above-named coporation symmits his statement for the purpose of changing its registered office or registered agent. I am familiar sing. I describe a statement of the purpose of changing its registered agent. I am familiar sing. I describe a statement for the purpose of changing its registered agent. I am familiar sing. I describe a statement for the purpose of changing its registered agent. I am familiar sing.								
SIGNATURE	Mala Care	PRESI DENT	ANT MILL		r, JANUARY 28, 1997			
		and title if applicable. (NOTE: F	legislered Applicative requirement	arred why reinstating)	DATE			
12.	OFFICERS AND		13. 7	ADDITIONS/CHANGES TO OFFICE				
TITLE	PD /	☐ DELETE	1.1 YITLE		Change Addition			
NAME	HERNANDEZ, RODOLFO JR		1.2 NAME					
STREET ADORESS	2121 PONCE DE LEON #1050		1.3 STREET ADDRESS	•				
CITY-ST-ZIP	CORAL GABLES FL		1.4 CITY - ST - ZIP					
TITLE	SD LICONANDEZ IOCHE	DELETE	2.1 TITLE		Change Addition			
NAME	HERNANDEZ, IRENE		2.2 NAME		·			
STREET ADDRESS	2121 PONCE DE LEON #1050		2.3 STREET ADDRESS					
CITY-ST-ZIP	CORAL GABLES FL		2. 4 CITY - ST - ZIP	·				
TITLE	VD	DELETE	3.1 TiTLE		Change Addition			
NAME	CASSEL, MARWIN S		3.2 NAME					
STREET ADDRESS	175 NW 1ST AVE #2000		3.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL		3.4. CITY - ST - ZIP					
TITLE		☐ DELETE	4.1 TITLE		Change Addition			
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS		}			
CITY-ST-ZIP			4.4 CITY-ST-ZIP					
TITLE		DELETE	5.1 TITLE		Change Addition			
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		DELETE	6.1 TITLE		Change Addition			

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 excuppe inental 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 of the received or trosted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change of an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

JANUARY 28,1997

(305)447-3993