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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F54469

FILED Feb 16, 1999 8:00am **Secretary of State**

02-16-1999 90041 019 ***158.75

•	CONSTRUCTION CORF	•							
Principal Place	e of Business	Ma	ailing Address				:#:: #:#:: #!#!! #!#!!		
2909 NW 82 AV	Æ .‡	290	9 NW 82 AVE						
MIAMI FL 33122			MIAMI FL 33122			DO NOT WRITE IN THIS SPACE			
US		US				3. Date Incorporated or Qualifed	1100.7102		
	j.					12/03/1981	•		
• p: : ID		1 22	Mailing Address			4. FEI Number	: A	pplied For	٠.,
2. Principal Pi	lace of Business	H-iii	Mailing Address			59-2141628		ot Applicable	i
Suite, Apt.	# 010	26	Suite, Apt. #, etc.				\$8.75	Additional	•
Suite, Apt.	#, etc.	27	Calle, ripli ir, ciai			5. Certificate of Status Desired	Fee R	equired	
City & State	<u> </u>	21	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution		to Fees	_
Zip	Country		Zip	Cou	intry	8. This corporation owes the current year	r Intangible ·		
24	25	29		30		Personal Property Tax.	☐Yes	□No	
	9. Name and Address of		tered Agent			10. Name and Address of New Registe	red Agent		
	,				81 Name				
	PRIGUEZ, IDALBERTO J.				82 Street Add	ress (P.O. Box Number is Not Acceptable)		-	
	NW 82 AVE					The same of the sa		1000000	
MAIM	MI FL 33122				83	1. 12 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2			
					84 City	And	85 Zip	Code	
	¥				1 1 '	poration submits this statement for the purposion's board of directors. I hereby accept the a	FL		
	am familiar with, and accept the	e obligations of	, 0000011 007.0000, 1				•		
\$IGNATURE	Signature, typed or printed name of regis				Agent signature require			ODS IN 12	ó
12.		stered agent and title ERS AND DIRE	CTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECT		100
<u> </u>	PD OFFIC	ERS AND DIRE		13. 1.1 TI	TLE	00 111011111111111111111111111111111111			(00) FF/ F
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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 or an attachment with an address, with all other like empowered.

SIGNATURE