

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 . . . \$165.00

FILED
Mar 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997
FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # J64994
1. Corporate Name
CHAQUI CONSTRUCTION, INC.
5741 DAWSON STREET, BAY 3
HOLLYWOOD, FLORIDA 33023

Principal Place of Business Mailing Address
CHAQUI CONSTRUCTION, INC.
5741 DAWSON STREET, BAY 3
HOLLYWOOD, FLORIDA 33023

NOTE: NEW ADDRESS

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 State Agency	26 Suite, Apt #, etc.	04/2/87	
22 City & State	27 City & State	4. FEI Number	Applied For
23 Zip	28 Zip	59-2800857	Not Applicable
24 Country	29 Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25	30	<input type="checkbox"/>	\$5.00 May Be Added to Fees
		6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
JORGE CHAQUI
20500 SW 49 CT
FT. LAUDERDALE FL. 33332

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FT. LAUDERDALE, FL 33332

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 and I am in full compliance with, and accept the obligations of, Section 607.0505, Florida Statutes.
SIGNATURE: [Signature] DATE: 2/4/97

12. OFFICERS AND DIRECTORS		DELETED
TITLE	PREV. TRCS.	<input type="checkbox"/>
NAME	JORGE CHAQUI	
STREET ADDRESS	5616 FOLK ST.	
CITY-ST-ZIP	HLWD. FL. 33021	
TITLE	J.P. / SEC.	<input type="checkbox"/>
NAME	CHERYL CHAQUI	
STREET ADDRESS	5616 FOLK ST.	
CITY-ST-ZIP	HLWD. FL. 33021	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		DELETED
1.1 TITLE	(NEW ADD)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	5741 DAWSON ST BAY 3	
1.4 CITY-ST-ZIP	HOLLYWOOD FL 33023	
2.1 TITLE	(NEW ADD)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	5741 DAWSON ST BAY 3	
2.4 CITY-ST-ZIP	HLWD FL 33023	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	000002105410	
5.3 STREET ADDRESS	-03/05/97--01073--016	
5.4 CITY-ST-ZIP	***165.00	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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 in 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 a qualified 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 or changed, or on an attachment with an address.
SIGNATURE: [Signature] - JORGE CHAQUI DATE: 2/4/97 DAYTIME PHONE #: (954) 966-5353

CR2E034 (9/96)