FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS 30-96 B **DOCUMENT #** MAYA CONSTRUCTION CORP. Principal Place of Business 18780 S.W. 355 STREET Mailing Address 18780 S.W. 355 STREET FLORIDA CITY FL 33034 FLORIDA CITY FL 33034 3. Date Incorporated or Qualified 3a. Date of Last Report 12/15/1988 05/01/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0088055 26 Not Applicable Suite, Apt. #, etc. 🙀 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be П 28 Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes X Yes \[\] No Zip Zio Country 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MARTINEZ, ROBERTO Street Address (P.O. Box Number is Not Acceptable) 82 18780 S.W. 355 STREET 83 FLORIDA CITY FL 33034 64 City 85 Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE 1. 1 TITLE Change Addition MARTINEZ, ROBERTO 12 NAME 353 N.E. 1ST ST., APT. 4 STREET ADDRESS 1.3 STREET ADDRESS HOMESTEAD FL CITY - \$1 - ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition 2 1 TITLE MARTINEZ, ROBERTO 2.2 NAME 18780 S.W. 355 STREET STREET ADDRESS 2 3 STREET ADDRESS FLORIDA CITY FL CHTY-ST-ZIP 2.4 CITY-ST-ZIP □ DELETE 3. 1 TITLE Change ☐ Addition 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - ZIP □ DELETE 4. 1 TITLE Change Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change ☐ Addition 5. 1 TITLE 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE 6. 1 TITLE Change Addition 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-7IP

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Way/in/ ROBERTO MARTINEZ, PRESIDENT 4/26/96 Date Daytime Phone #

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indiesped 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 3.1 changed of on an attentiment with an address.