

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

FILED

**Apr 01 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 # L15522 (0)

1. Corporation Name
A & M MECHANICAL CONTRACTORS, INC.



Principal Place of Business: **C/O MIGUEL RODRIGUEZ, 7495 N.W. 7TH ST BAY 3, MIAMI FL 33126**

Mailing Address: **C/O MIGUEL RODRIGUEZ, 7495 N.W. 7TH ST BAY 3, MIAMI FL 33126**

3. Date Incorporated or Qualified: **09/05/1989**

3a. Date of Last Report: **03/04/1996**

4. FEI Number: **65-0147675**

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-23) and Mailing Address (24-30) fields with sub-headers for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: **RODRIGUEZ, MIGUEL, 3841 SW 130TH AVE, MIAMI FL 33175**

10. Name and Address of New Registered Agent (81-84): **RAYON, AURORA, 3841 SW 130 AVE, MIAMI, FL 33175**

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: *Aurora Rayon* (NOTE: Registered Agent signature required when reinstating)

DATE: **3-25-97**

12. OFFICERS AND DIRECTORS

TITLE: PP PRESIDENT ONLY	<input type="checkbox"/> DELETE
NAME: RODRIGUEZ, MIGUEL	
STREET ADDRESS: 3841 SW 130TH AVE	
CITY-ST-ZIP: MIAMI FL	
TITLE: DSTV	<input type="checkbox"/> DELETE
NAME: RAYON, AURORA	
STREET ADDRESS: 3841 SW 130TH AVE	
CITY-ST-ZIP: MIAMI FL	
TITLE: V	<input type="checkbox"/> DELETE
NAME: RAYON, LUIS	
STREET ADDRESS: 3841 S.W. 130 AVE.	
CITY-ST-ZIP: MIAMI FL 33175	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
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	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
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 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 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: *Aurora Rayon* (NOTE: Signature and typed or printed name of signing officer or director)

DATE: **3-25-97** (305)267-3144

CR2E034 (9/96)