

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mothman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M47864 (7)**
1. Corporation Name
FORTUNE CONSTRUCTION, INC.



Principal Place of Business: **C/O THE RELATED COMPANIES OF FLA. INC. 2828 CORAL WAY MIAMI FL 33145**
Mailing Address: **C/O THE RELATED COMPANIES OF FLA. INC. 2828 CORAL WAY MIAMI FL 33145**

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-fields for Suite, Apt. #, etc., City & State, Zip, and Country.

3. Date Incorporated or Qualified: **03/06/1987**
3a. Date of Last Report: **03/31/1995**
4. FID Number: **65-0120383**
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

9. Name and Address of Current Registered Agent

**ALHADEFF, E. RICHARD
2200 MUSEUM TOWER
150 WEST FLAGLER STREET
MIAMI FL 33130**

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address (P.O. Box Number is Not Acceptable), City, and Zip Code.

11. Pursuant to the provisions of Sections 607.0602 and 607.1506, 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 607.0605, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Officer or Director

(21)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> DELETE	D ROSS, STEPHEN M. 625 MADISON AVENUE NEW YORK, NY 10022	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	DPT PEREZ, JORGE M. 2828 CORAL WAY MIAMI FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	V ROCHA, ROBERTO 2828 CORAL WAY MIAMI FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	VP ALVAREZ, MARCELO 2828 CORAL WAY MIAMI FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	AS HERNANDEZ, ANGEL 2828 CORAL WAY-PH MIAMI FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	VP, AS
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I do hereby certify that the information supplied with this filing voluntarily furnishes and does not qualify for the exemption stated in Section 119.07(3)(a) Florida Statutes. I further certify that the information included 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 of this report, or on an attached list with my address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCELO A. ALVAREZ
Vice President

3/20/96 305-4609900

CR2E034 (12/95)