

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

**FILED**  
Mar 07 1996 8:00 am  
Secretary of State

**DOCUMENT # P95000030875 (5)**

1. Corporation Name  
**MIAMI REMODELING EXPERTS, INC.**



Principal Place of Business: 30501 S.W. 157TH AVENUE HOMESTEAD FL 33033  
Mailing Address: 30501 S.W. 157TH AVENUE HOMESTEAD FL 33033

3. Date Incorporated or Qualified: **04/24/1995**  
3a. Date of Last Report

21	2. Principal Place of Business	21	6850 CORAL WAY	26	2a. Mailing Address	26	6850 CORAL WAY
22	Suite, Apt. #, etc.	27	SUITE 200	27	Suite, Apt. #, etc.	27	SUITE 200
23	City & State	28	MIAMI, FLORIDA	28	City & State	28	MIAMI, FLORIDA
24	Zip	29	33155	29	Zip	30	33155
25	Country	25	DADE	30	Country	30	DADE

4. FEI Number: 65-0575164  
Applied For:  Not Applicable  
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**

**10. Name and Address of New Registered Agent**

VILLAMORA, ANGEL A  
30501 S.W. 157TH AVENUE  
HOMESTEAD FL 33033

81 Name: SERAFIN R. PEREZ  
82 Street Address (P.O. Box Number is Not Acceptable): 6850 CORAL WAY  
83 SUITE 200  
84 City: MIAMI FL 85 Zip Code: 33155

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: *Serafin Perez* (NOTE: Registered Agent's signature required when registering) DATE: 03/07/1996

**12. OFFICERS AND DIRECTORS**

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	VILLAMOR, ANGEL A	
STREET ADDRESS	3001 S.W. 157THA VE.	
CITY- ST- ZIP	HOMESTEAD FL 33033	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

1	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2	NAME	SERAFIN R. PEREZ	
3	STREET ADDRESS	6390 SW 20TH STREET	
4	CITY- ST- ZIP	MIAMI, FLORIDA 33155	
5	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6	NAME		
7	STREET ADDRESS		
8	CITY- ST- ZIP		
9	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
10	NAME		
11	STREET ADDRESS		
12	CITY- ST- ZIP		
13	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
14	NAME		
15	STREET ADDRESS		
16	CITY- ST- ZIP		

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 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: *Serafin Perez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/07/1996 661-1616  
DATE DAY/MONTH/YEAR PHONE #

CR2E034 (12/95)