


**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

APPROVED AND FILED *ppb/2*

1997 JUN 23 PM 12:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFFT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000035032 (7)
1. Corporation Name
A & R LASTRA CONSTRUCTION, INC.



Principal Place of Business 20035 RANCH ROAD MIAMI FL 33189	Mailing Address 20035 RANCH ROAD MIAMI FL 33189
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 20025 Ranch Rd Suite, Apt. #, etc. 22	2a. Mailing Address 26 20025 RANCH Rd Suite, Apt. #, etc. 27
City & State 23 Miami, FL	City & State 28 Miami, FL
Zip 24 33189	Country 25 DADE
Zip 29 33189	Country 30 DADE

3. Date Incorporated or Qualified 04/22/1996	3a. Date of Last Report
4. FEI Number 65-0760209	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**LASTRA, MARIA R
20035 RANCH ROAD
MIAMI FL 33189**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	600002248516--7
83	-07/28/97--01005--001
	****170.00 ****170.00
84 City	FL
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 *Maria R. Lastra* (NOTE: Registered Agent Signature required when reinstating) DATE **7/16/97**

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	LASTRA, MARIA R	
STREET ADDRESS	20035 RANCH ROAD	
CITY-ST-ZIP	MIAMI FL 33189	
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		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President/ CFO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MARIA R. LASTRA	
1.3 STREET ADDRESS	20025 Ranch Rd	
1.4 CITY-ST-ZIP	MIAMI, FL 33189	
2.1 TITLE	President/CEO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Alejandro Lastra Jr.	
2.3 STREET ADDRESS	20025 RANCH Rd	
2.4 CITY-ST-ZIP	MIAMI, FL 33189	
3.1 TITLE	Vice President/Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Rosalia LASTRA	
3.3 STREET ADDRESS	20025 RANCH Rd	
3.4 CITY-ST-ZIP	MIAMI, FL 33189	
4.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Robert E. Riling Jr.	
4.3 STREET ADDRESS	17021 N. Bay Rd. #127	
4.4 CITY-ST-ZIP	Miami, FL 33160	
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 *Maria R. Lastra* DATE **7/23/97**

CR2E034 (4/97)

A & R Lastra Construction, Inc.



pg 2 of 2

July 17, 1997

Division of Corporations
Annual Report filings
PO Box 6327
Tallahassee, FL 32314-6327

To whom it may concern,

I am writing this letter to inform you, why A & R Lastra Construction, Inc., did not file for the annual report when it was due. Unfortunately, we never received the first request form. I do not know what happened, I do know that it was never received at either our previous or current address. Although we have moved from our previous address, we only moved next door and we are presently still receiving the mail, which is sent to use, at that address. Since our company has only been in existence for one year, we were unaware of the filing of the annual report.

We ask you please bare with use. Only this once, now that we know about this, even if we do not receive the form, we will be calling your department come February or May to find out where it is.

Inclosed, along with this letter, you will find the form and the check for \$170.00. This is what I was told to do, by your department, when I called on 7/16/97, the day we received your second request.

Sincerely,

A handwritten signature in cursive script that reads "Maria R. Lastra". The signature is written in black ink and is positioned above the typed name and title.

Maria R. Lastra
CFO