

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

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Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000070468 (0)**

1. Corporation Name
ALEAGUE CONTRACTORS, INC.



Principal Place of Business 14939 S.W. 143RD PLACE MIAMI FL 33186	Mailing Address 14939 S.W. 143RD PLACE MIAMI FL 33186-5631
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3. Date Incorporated or Qualified 09/13/1995	3a. Date of Last Report 09/09/1996
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2. Principal Place of Business 21 10651 S.W. 88th St. Suite, Apt. #, etc. 22 Suite 218 City & State 23 miami, FL Zip 24 33176 Country 25 USA	2a. Mailing Address 26 10651 S.W. 88th Street Suite, Apt. #, etc. 27 Suite 218 City & State 28 miami, FL Zip 29 33176 Country 30 USA	4. FET Number APPLIED FOR 65-060800D	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

**SALGUEIRO, JORGE
8020 S.W. 89TH TERRACE
MIAMI FL 33156**

10. Name and Address of New Registered Agent

81 Name Jeannette Hernandez-Suarez, Esq.
82 Street Address (P.O. Box Number is Not Acceptable) 10651 S.W. 88th Street
83 Suite 218
84 City miami
85 Zip Code FL 33176

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 **Jeannette H-S Hernandez-Suarez, Registered Agent** DATE **4/21/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DPST	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME SUAREZ, GUILLERMO JR		1.2 NAME	
STREET ADDRESS 14939 SW 143RD PLACE		1.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33186		1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 **Guillermo Suarez Jr** DATE **4/23/97** (305) 254-1231

CR2E034 (9/96)