


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.)

FILED
Sep 15 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 # P95000000913 (0)

1. Corporation Name

AURORA BUILDERS, INC.

Principal Place of Business

Mailing Address

6405 NW 36 ST
#115
VIRGINIA GARDENS FL 33166

6405 NW 36 ST
#115
VIRGINIA GARDENS FL 33166



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 5245 NW 36 ST	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 #200	27 SAME
City & State	City & State
23 MIAMI SPRINGS FL	28
Zip	Zip
24 33166	29
Country	Country
25 USA	30

3. Date Incorporated or Qualified	3a. Date of Last Report
01/02/1995	10/07/1996
4. FEI Number	Applied For
65-0546649	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 owes or has paid the current year Intangible Personal Property Tax due June 30.	Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MATUTES, OSCAR E
6405 NW 36 ST #115
VIRGINIA GARDENS FL 33166

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	
MIAMI SPRINGS FL	33166

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 607.0502, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

Signature required when reinstating)

DATE

OSCAR E. MATUTES

6/30/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:	
TITLE	DPST	1.1 TITLE	
NAME	RADELAT, TERESITA	1.2 NAME	
STREET ADDRESS	6405 NW 36 ST #115	1.3 STREET ADDRESS	5245 NW 36 ST #200
CITY-ST-ZIP	VIRGINIA BEACH FL 33166	1.4 CITY-ST-ZIP	MIAMI SPRINGS FL 33166
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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

SIGNATURE REQUIRED

CR2E034 (4/97)