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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

LA VICTORIA CONSTRUCTION COMPANY, INC.

FILED May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
· . · · ·						
P.O. BOX 430785 MIAMI FL 33243-0785		P.O. BOX 430785 MIAMI FL 33243-0785	P.O. BOX 430785 Miami Fl. 33243-0785			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 06/05/1967
2. Principal Plac	e of Business	2a. Mailing Address 26				4, FEI Number Applied For 59-1198734 Not Applicable
Sulte, Apt. #,	etc.	Suite, Apt. #, etc.				\$0.75 Addisonal
22		27	27			Fee Required
City & State		City & State	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Co	Country		B. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Yes No
===	9. Name and Address of Curre	_,	100	T		10. Name and Address of New Registered Agent
DIAZ, NANCY					Name	
	SUNSET DR.					
	II FL 33143		82 Street Ac		Street	Address (P.O. Box Number is Not Acceptable)
				83		
				84	City	FL 85 Zip Code
office or reg agent. I am	the provisions of Sections 607.05 istered agent, or both, in the Sta familiar with, and accept the obli	502 and 607.1508, Florida Sta le of Florida. Such change wa igations of, Section 607.0505,	tutes, the a s authorize Florida Sta	above ed by atutes	named the cor	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE Sig	nature typed or printed name of registered a	agent and title if applicable (A	QTE. Register	ed Age	nt signatur	e required when reinstating) DATE
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P		1.1	1.1 TITLE		Change Addition
NAME DIAZ, NANCY			1.2 NAME			
STREET ADDRESS	8081 SW 72ND STREET		1.3 STRI		ADDRESS	
CITY-ST-ZIP	MIAMI FL 33143		1.4 CITY - ST - ZIP		T-21P	
TITLE	\$ /1/////	DELETE	DELETÉ 2.1 Tri			FOIRY NIAMELY PSTD Tolange Addition (USI SW 12 ST MIAMI F/ 33143
NAME	DIAZ, ANGELAR//		2.21	2.2 NAME		CUCI SA) 72 ST
STREET ADDRESS	JE28 PLAGETAS		2.3 5	2.3 STREET ADDRESS		FOR VOICE
CITY-ST-ZIP	OORAL KABLES FL 33146		2.4	2.4 CITY-ST-ZIP		MIAMI F/ 33/43
TITLE		☐ DELETE	3.11	HTLE		☐ Change ☐ Addition
NAME			3.2	MAME		
STREET ADDRESS			3.33	TREET.	Address	
CITY-ST-ZIP			3,4	CITY-S	T- 21P	
TITLE		☐ DELETE	4.11	ITLE		Change Addition
NAME			4.2	NAME		
STREET ADDRESS			4,3 \$	STREET	ADDRESS	
CITY-ST-ZIP			4.4 (HTY-SI	r-ZIP	
TITLE		☐ DELETE	5.1.3	ITLE		☐ Change ☐ Addition
NAME			5.21	IAME		
STREET ADDRESS			5.3 \$	TREET.	ADDRESS	
CITY-ST-ZIP			5.4 (ITY-SI	I - ZIP	
TITLE	☐ DELETE		6.1 1	6.1 TITLE		☐ Change ☐ Addition
NAME			6.21	IAME		
STREET ADDRESS			6.3 5	TAFET	address	
CITY-ST-ZIP			6.4 (OTY-SI	[- Z (P	
	ify that the information supplied	with this filing does not qualify				ed in Section 119 07(3)(i) Florida Statutes, I further certify that the information

ringery certify that the information supplied with this ming does not qualify for the exemption stated in section 119.0 (3)(i), Florida Statutes. Further certify that the informatio 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.

4/22/90