## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED** PROFIT FLORIDA DEPARTMENT OF STATE Jan 20 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** 360462 (6) J. T. C. CONSTRUCTION CORP. Principal Place of Business Mailing Address 2750 S.W. 87TH AVE ROOM #Z-10 2750 S.W. 87TH AVE ROOM #Z-10 MIAMI FL 33165 MIAMI FL 33165 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 03/02/1970 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 5 W8NAUE SW 81 AUR 2750 59-1395785 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Çoun'y A 8. This corporation owes or has pald the current year Intangible Personal Property Tax due June 30. Yes \[ \bigcap \text{No} \] No 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CRESPO, JOSE T 2750 S.W. 87 AVENUE Street Address (P.O. Box Number is Not Acceptable) #210 83 **MIAMI FL 33165** City Zip Code 85 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 Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change DELETE Addition TITLE PD 1.1 TITLE CRESPO, JOSE T NAME 1.2 NAME 2750 S.W. 87 AVE., #210 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE NAME PEREZ. MARIA 2.2 NAME STREET ADDRESS 2750 S.W. 87 AVE.,#210 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TIT: F 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. City-ST-7IP CITY - ST - ZIP Additlon TITLE DELETE 4.1 TITLE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP

32E034

Addition

Change

r the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information trate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECT

6.1 TITLE 6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

DELETE

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filt indicated on this annual report or supplemental annual officer or director of the corporation or the receiver of the Block 12 or Block 13 if changed, or on an attachment we