

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 475397

1. Corporation Name

ONORATI CONSTRUCTION & COATIVES, INC.

Principal Place of Business

18453 SW 87 PL
MIAMI, FL 33157

Mailing Address

P.O. Box 570878
MIAMI, FL 33257

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

9. Name and Address of Current Registered Agent

FRANK A. ONORATI JR.
18453 SW 87 PLACE
MIAMI, FL 33157

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

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

Frank A. Onorati Jr.

Signature type for printed name of registered agent or officer or director.

(Note: Registered Agents, partners, responsible officers, etc.)

4-26-99

12. OFFICERS AND DIRECTORS

TITLE	[] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PRESIDENT	[] Change	[] Add
12 NAME	FRANK A. ONORATI, JR.		
13 STREET ADDRESS	18453 SW 87 PL		
14 CITY-ST-ZIP	MIAMI, FL 33157		
21 TITLE		[] Change	[] Add
22 NAME			
23 STREET ADDRESS			
24 CITY-ST-ZIP			
31 TITLE		[] Change	[] Add
32 NAME			
33 STREET ADDRESS			
34 CITY-ST-ZIP			
41 TITLE		[] Change	[] Add
42 NAME			
43 STREET ADDRESS			
44 CITY-ST-ZIP			
51 TITLE		[] Change	[] Add
52 NAME			
53 STREET ADDRESS			
54 CITY-ST-ZIP			
61 TITLE		[] Change	[] Add
62 NAME			
63 STREET ADDRESS			
64 CITY-ST-ZIP			

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****150.00 ****150.00

14. I 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 697, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Frank A. Onorati Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-99 (305) 253-4185

FILED

99 APR 29 AM 11:54

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

MAY 5, 1973

4. FEI Number

59-1587279

[] Apply 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 owes the current year intangible
Personal Property Tax

[] Yes [X] No

10. Name and Address of New Registered Agent

CR2E034 (11/98)