9/28/99 (301)636-2722

PROFIT CORPORATION ANNUAL REPORT 1999		<b>Katheri</b> Secretar	RTMENT OF STATE  ne Harris y of State  CORPORATIONS	Fit. Self ALTARY Self SIGN OF CO	EB OF STAIL ORPORATIONS
OCUMENT # 51	4939			99 OCT -1	PM 12: 04
R.P.A. CONSTRUCTION C	ORPORATION				
ncipal Place of Business  SW 45 TERR	5750	ling Address SW 45 TERR			
. BOX 145117 RAL GABLES FL 33114-2117		BOX 145117 IAL GABLES FL 33114-	2117	DO NOT WRIT  3. Date Incorporated or Qualified	E IN THIS SPACE
	-			11/22/1976	
Principal Place of Business	2a.	Mailing Address		4. FEI Number 59-1769074	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable   \$8.75 Additional
City & State	27	City & State			Fee Required
	28		,	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip { Country { 25 }	29	Zip -	Country 30	<ol> <li>This corporation owes the curre Intangible Personal Property.</li> </ol>	nt year Yes X No
	ss of Current Registe	ered Agent		10. Name and Address of New R	
DE LOS REYES, RAFAEL	A		81 Name		
5750 SW 45 TERR			82 Street Add	lress (P.O. Box Number is Not Acceptal	ble)
			1 (		j
MIAMI, FL 33155			83		
			83 City		65 Zip Code
MIAMI, FL 33155	ions 607,0502 and 60	7.1508, Florida Statute	84 City	oration submits this statement for the pu	
MIAMI, FL 33155	ions 607.0502 and 607, in the State of Florid, pept the obligations of,	7. 1508, Florida Statute a. Such change was a section 607.0505, Flo	84 City	oration submits this statement for the pu lion's board of directors. I hereby accept	
MIAMI, FL 33155			84 City		
MIAMI, FL 33155  Fursuant to the provisions of sect office or registered agent, or both agent 1 am familiar with, and acc SNATURE		applicable (NC	84 City  s, the above-named corporation of the corp	quired when reinstating)	PL pose of changing its registered the appointment as registered  DATE  CICERS AND DIRECTORS IN 12
MIAMI, FL 33155  Pursuant to the provisions of sect office or registered agent, or both agent. I am familiar with, and acc SNATURE  Signature typed or protect name of PD	of registered agent and little if	applicable (NC	84 City  s, the above-named corputationized by the corporational Statutes.  TE Registered Agent signature ret  13.  1.1 TITLE	quired when reinstating)	rpose of changing its registered the appointment as registered
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SIGNATURE WIND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: