

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morrum
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY - 1 AM 10: 29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 517401 (6)

1. Corporation Name

M. P. D'ERRICO & SONS OF FLORIDA, INC.

Principal Place of Business

2420 E SUNRISE BLVD
FT LAUDERDALE FL 33304
US

Mailing Address

2420 E. SUNRISE BLVD
FTL LAUDERDALE FL 33304
US

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified 10/28/1976
3a. Date of Last Report 04/25/1994

4. FEI Number 59-1787985
Applied 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 has liability for intangible tax under S. 193.032, Florida Statutes Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

D'ERRICO, SILVIA A
2439 RALEIGH ST
HOLLYWOOD FL 33030

10. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	VD
NAME	D'ERRICO, MARCEL
STREET ADDRESS	2439 RALEIGH ST
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	PD
NAME	D'ERRICO, STEFANIA R
STREET ADDRESS	2439 RALEIGH ST
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	STD
NAME	D'ERRICO, SILVIA A
STREET ADDRESS	2439 RALEIGH ST
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	D
NAME	D'ERRICO, DINO
STREET ADDRESS	2439 RALEIGH ST
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	D
NAME	D'ERRICO, MARCELLO J
STREET ADDRESS	2439 RALEIGH ST
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 assignee of the corporation; and that my name appears in Block 12 or Block 13 if changed, by an attachment with this filing.

SIGNATURE:

Stefania R. D'Errico
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

4/28/95 305-563-3922
DATE (Type Here)