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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 07 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 530931

(5)

MARILU CONSTRUCTION, INC.

Principal Place of Business Mailing Address			· · · · · · · · · · · · · · · · · · ·	T NOTICE OTTOR ALIES BRAID BOLDO VITAL BARIL BLAND DEPLI BLAND BARIL BARIL BARIL BARIL		
40 NW 135 AVE P.O. BOX 651204 MIAMI FL 33265		40 NW 135 AVE P.O. BOX 651204 Miami Fl 33265-1204				
				3. Date Incorporated or Qualified 04/06/1977	3a. Date of Last Report 05/01/1996	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-1733834	Not Applicable	
Suite. Apt	#. etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Ζ ₁ ρ 24	Country 25	Zip 29	Country 30	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	gistered Agent	
	SA, PEDRO P.		81 Name			
40 N. W. 135 AVENUE MIAMI FL 33165			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
			83			
			84 City		FL 85 Zip Code	
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the above-named corp	poration submits this statement for the potion's board of directors. I hereby accep	urpose of changing its registered	
agent / ar	m familiar with, and accept the obliga	ions of Section 607.0505, FI	orida Statutes.	.)	t the appointment as registered	
SIGNATURE	Included to	na	vice-Pro		2-3-97	
12.	Signature hydrod or printed name of registered ager OFFICERS AND		E: Registered Agent signature requi	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12	
TITLE	-DP	DELETE	1.1 TITLE	7,5511015,511,11025,15 51,15	Change Addition	
NAME	MESA, PEDRO P.		1.2 NAME	·		
STREET ADDRESS	40 N. W. 135TH AVENUE		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST - ZIP		į	
TITLE	10	☐ DELETE	21 TITLE	The state of the s	Change Addition	
NAME	MESA, MERCEDES		2.2 NAME		,	
STREET ADDRESS	40 N. W. 135TH AVENUE		2.3 STREET ADDRESS			
CITY-ST-ZIF	MIAMI FL		2.4 CITY-ST-ZIP			
TITLE	D	DELETE	3.1 TITLE		Change Addition	
NAME	MESA, MARIA LUZ		3.2 NAME			
STREET ADDRESS	110 N. E. 135TH AVENUE		3.3 STREET ADDRESS			
CITY-ST-ZIF	MIAMI FL		3 4. CITY - ST- ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - ZIP		······	4.4 CITY - ST - ZIP		····	
TITLE		DELETE	5.1 YITLE	•	Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP	······		
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filling 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 607, Florida Statutes; and that my name appears in Block 12 or Block 12 or Block 12 or Block 12 or Block 13 or beautiful an address.