

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 599119

(5)

1. Corporation Name

MIRFER LATHING AND PLASTERING, INC.

Principal Place of Business

3642 S.W. 15TH STREET
MIAMI FL 33145

Mailing Address

3642 S.W. 15TH STREET
MIAMI FL 33145-1030

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

3. Name and Address of Current Registered Agent

MIRANDA, LUIS
3642 S.W. 15TH STREET
MIAMI FL 33145

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 607.1108, 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 this appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person filing this report (must be a resident of Florida)

Signature of the person filing this report (must be a resident of Florida)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE ☐ DELETED

NAME
PSTD
MIRANDA, LUIS
STREET ADDRESS
3642 S.W. 15TH STREET
CITY-STATE-ZIP
MIAMI FL

12.2 TITLE ☐ DELETED

12.3 NAME

12.4 STREET ADDRESS

12.5 CITY-STATE-ZIP

12.6 TITLE ☐ DELETED

12.7 NAME

12.8 STREET ADDRESS

12.9 CITY-STATE-ZIP

12.10 TITLE ☐ DELETED

12.11 NAME

12.12 STREET ADDRESS

12.13 CITY-STATE-ZIP

12.14 TITLE ☐ DELETED

12.15 NAME

12.16 STREET ADDRESS

12.17 CITY-STATE-ZIP

12.18 TITLE ☐ DELETED

12.19 NAME

12.20 STREET ADDRESS

12.21 CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE ☐ Change ☐ Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-STATE-ZIP

13.5 TITLE ☐ Change ☐ Addition

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY-STATE-ZIP

13.9 TITLE ☐ Change ☐ Addition

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY-STATE-ZIP

13.13 TITLE ☐ Change ☐ Addition

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY-STATE-ZIP

13.17 TITLE ☐ Change ☐ Addition

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY-STATE-ZIP

13.21 TITLE ☐ Change ☐ Addition

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.02(3)(g), Florida Statutes. I further certify that the information indicated on this annual report or application/annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 13.

SIGNATURE

Luis Miranda

3/25/97 (305) 444-4351

CR25034 (9/96)