

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR -9 AM 8:59

DOCUMENT # 608665 (6)

1. Corporation Name
NOEL CONSTRUCTION, INC.

Principal Place of Business
~~8116 NW 162 ST.
MIAMI LAKES FL 33016
US~~

Mailing Address
~~15478 NW 7TH CT.
SUITE 205
MIAMI LAKES FL 33016
US~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **02/01/1979** 3a. Date of Last Report **04/13/1994**

4. FEI Number **59-1887248** 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. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **331 S.W. 135TH AVE** 26 **331 S.W. 135TH AVE.**

Suite, Apt. #, etc. Suite, Apt. #, etc.
22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

City & State City & State
23 **MIAMI, FL** 28 **MIAMI, FL**

Zip Country Zip Country
24 **33184** 25 **DADE** 29 **33184** 30 **DADE**

9. Name and Address of Current Registered Agent
**NUNEZ, CARLOS N
331 SW 135TH AVE
MIAMI FL 33184**

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **FL** B5 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	T
NAME	NUNEZ, NAYDA J
STREET ADDRESS	331 SW 135TH AVE
CITY- ST- ZIP	MIAMI FL
TITLE	NUNEZ, OCTAVIO N
NAME	1116 NW 162 ST.
STREET ADDRESS	MIAMI LAKES FL
CITY- ST- ZIP	
TITLE	P
NAME	NUNEZ, CARLOS N
STREET ADDRESS	331 SW 135TH AVE
CITY- ST- ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	NUNEZ, CARLOS N.	
1.3 STREET ADDRESS	331 S.W. 135TH AVE.	
1.4 CITY- ST- ZIP	MIAMI, FL 33184	
2.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	NUNEZ, NAYDA J.	
2.3 STREET ADDRESS	331 S.W. 135TH AVE.	
2.4 CITY- ST- ZIP	MIAMI, FL 33184	
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 110.07(3)(k), 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 107, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Carlos Nunez* **4/13/95 (305) 227-1270**
(Signature) (Date)