

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

**APPROVED AND FILED**

95 MAY -1 PM 2:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995  
  
 FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mumam  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **614343** (2)  
 1. Corporation Name  
**M.A.P. BUILDERS, INC.**

Principal Place of Business: **700 NW 107TH AVENUE MIAMI FL 33172**  
 Mailing Address: **700 NW 107TH AVENUE MIAMI FL 33172**

|   |                                |  |  |
|---|--------------------------------|--|--|
| 3. Filing Date of Report: <b>03/30/1979</b> |                                | 3a. Date of Last Report: <b>05/01/1994</b>                 |  |
| 2. Filing Date of 1994 Report: <b>21</b>    | 2b. Mailing Address: <b>26</b> | 4. FFI Number: <b>59-1908120</b>                           | Applied For: <input type="checkbox"/> Not Applicable |
| 22  | 27                             | 5. Certificate of Status (Amend): <input type="checkbox"/> | \$8.75 Additional Fee Required                       |
| 23  | 28                             | 6. Election Campaign Financing: <input type="checkbox"/>   | \$5.00 May Be Added to Fees                          |
| 24  | 25                             | 29   | 30   |

9. Name and Address of Current Registered Agent  
**WATSKY, MORRIS J., ESQ.**  
**700 NW 107TH AVENUE**  
**MIAMI FL 33172**

10. Name and Address of New Registered Agent  
 B1 Name  
 B2 Street Address, P.O. Box Number, if Not Applicable  
 B3  
 B4 City  
 FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.03(1) and 607.15(1), 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 and agree with and accept the obligations of Section 607.15(1), Florida Statutes.

SIGNATURE: \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS          |                                      | 13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS |   |
|-------------------------------------|--------------------------------------|--|---|
| NAME: <b>DC MILLER, LEONARD</b>     | 700 N.W. 107TH AVENUE<br>MIAMI FL    | 1. NAME  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME: <b>VD BOLOTIN, IRVING</b>     | 700 NW 107TH AVE, 4TH FL<br>MIAMI FL | 2. NAME  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME: <b>VD PEKOR, ALLAN J.</b>     | 700 NW 107TH AVE, 4TH FL<br>MIAMI FL | 3. NAME  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME: <b>SD COLE, ROBERT B.</b>     | 700 NW 107TH AVE, 4TH FL<br>MIAMI FL | 4. NAME  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME: <b>AS SANTAELLA, GRACE</b>    | 700 N.W. 107TH AVENUE<br>MIAMI FL    | 5. NAME  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME: <b>AS SIERRA, E. KATHLEEN</b> | 700 NW 107TH AVE, 4TH FL<br>MIAMI FL | 6. NAME  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I hereby certify that the information supplied with this filing is complete, correct and does not conflict with the information stated in the Florida Statutes. I further certify that the information is true and correct 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 registered agent or person empowered to execute this report, as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or 13 of this report in accordance with the provisions of the Florida Statutes.

SIGNATURE: *Kathleen E. Sierra* **Kathleen E. Sierra** 4/17/95 (305) 229-6400  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR