

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
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

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

WATSKY, MORRIS J., ESQ.
700 NW 107TH AVENUE
MIAMI FL 33172

3. Date Incorporated or Qualified
03/30/1979

3a. Date of Last Report
05/01/1995

4. FET Number

59-1908120

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. 190.032,
Florida Statutes

Yes No

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

(804) Registered Agent signature required when transferring

DATE

12. OFFICERS AND DIRECTORS

TITLE DC
NAME MILLER, LEONARD
STREET ADDRESS 700 N.W. 107TH AVENUE
CITY-ST-ZIP MIAMI FL

DELETE

TITLE VD
NAME BOLOTIN, IRVING
STREET ADDRESS 700 NW 107TH AVE, 4TH FL
CITY-ST-ZIP MIAMI FL

DELETE

TITLE VD
NAME PEKOR, ALLAN J.
STREET ADDRESS 700 NW 107TH AVE, 4TH FL
CITY-ST-ZIP MIAMI FL

DELETE

TITLE SD
NAME COLE, ROBERT B.
STREET ADDRESS 700 NW 107TH AVE, 4TH FL
CITY-ST-ZIP MIAMI FL

DELETE

TITLE AS
NAME SANTAELLA, GRACE
STREET ADDRESS 700 N.W. 107TH AVENUE
CITY-ST-ZIP MIAMI FL

DELETE

TITLE AS
NAME SIERRA, E. KATHLEEN
STREET ADDRESS 700 NW 107TH AVE, 4TH FL
CITY-ST-ZIP MIAMI FL

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2. 1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3. 1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4. 1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5. 1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6. 1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

900001811149
-05/07/96--01089--004
***200.00

500001889695
-05/06/96--91948--004
***200.00

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 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 registered agent 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 if changed, or on the attachment with an address.

SIGNATURE:

Kathleen E. Sierra

Kathleen E. Sierra

4-5-96

229-6400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)