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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name

688538

(8)

FILED Jan 25 1996 8:00 am Secretary of State

	MUNITY ASPHALT CORP.							
Principa' Place of Business 14005 NW 186 ST HIALEAH FL 33015 US		Mailing Address 14005 NW 186 ST HIALEAH FL 33015					,,,	
03		US			 Date Incorporated or Qualified 09/22/1980 	3a. Date o	of Last Re 6/13/19	•
F i	ace of Business	2a. Mailing Address			4. FEI Number			Applied For
Suite, Apt.	H oto	26			59-2023298			Vot Applicable
[22]		27		Certificate of Status Desired			Additional Required	
City & State		City & State		Election Campaign Financing \$5.00 May Be				
23		28			Trust Fund Contribution			d May Be d to Fees
Zg>	Country	Zip	Country	/	8. This corporation has liability for		under s	199.032,
24	[25] 9. Name and Address of Current	Pagistared Agent	30			S □ No		
	g, Name and Address of Content	negistered Agent	81	Name	10. Name and Address of New F	tegistered A	gent	
DALE	CHARLES \$. JR.							
414 NE 4TH STREET			82	Street Add	ress (P.O. Box Number is Not Acceptat	ole)		
FT. LAUDERDLAE FL 33309			63	 -				
ļ			84	City			T T	<u> </u>
				l '		FL	1 1 .	Code
Manager Valu	o the provisions of Sections 607.0502 ed agent, or both, in the State of Florid h, and accept the obligations of, Section	and 607.1508, Florida Statute a. Such change was authorizi on 607.0505, Florida Statutes	es, the above-i ed by the corp	named corpo poration's boa	ration submits this statement for the pu ird of directors. I hereby accept the app	rpose of chan ointment as re	ging its re agistered	egistered office agent. I am
\$IGNATURE_	Signature, typed or posited name of registered agent a	ON) side it applicable (NO	II. Registered Agei	nt signaturo requira	od when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	ICERS AND [DIRECTO	RS IN 12
T-1LF	PD	DELETE	1.1 THILE				Change	☐ Addition
NAM:	FERNANDEZ, JOSE		1.2 NAME					
STREET ADDRESS	7577 SW 81ST AVE MIAMI FL		1.3 STREET ADDRESS					
CHY ST ZIP	V WIAWITE	☐ DELETE	1.4 C/TY-S 2 1 T/TLE	ST-ZIP			Ohanna	
NAME :	GARFFER, MICHAEL	- Detter	2 2 NAME			Ц	Change	☐ Addition
STREET ADDRESS	6721 SW 76TH TERR	704 OU TOTAL TODO		I ADDRESS				
CITY+S1+ZIP	MIAMI FL		2 4 CiTY - 5	1				
TITLE	AS	DELETE	3 1 TIFLE				Change	Addition
NAME	DALE, CHARLES S. JR.		3.2 NAME	ļ	٠.	• • •	-	_
STEELT ADDRESS	701 W. CYPRESS CREEK RI	D.	3 3 STREE	T ADDRESS				
OTY-ST-ZIP	FT. LAUDERDALE FL		3 4 CITY - 9	ST - ZIP				
TIFLE	VD HALLEY	☐ DEFELE	4. 1 TITLE				Change	☐ Addition
NAME CLOSE LA ASSENDA DE	IGNACIO, HALLEY 3501 SW 139TH AVE		4.2 NAME					
STREET ADDRESS CITY ST-ZIP	MIRAMAR FL		4.3 STREET					
TITLE	STD	DELETE	4.4 CITY - 5 5 1 TITLE	ST - ZIP			Channa	T Addition
NAME	RIOS, GEORGE E		5 2 NAME			LJ	Change	Addition
STREET ADDRESS	609 PUERTA AVE		5 3 STREET	ADDRESS				
CITY ST ZIP	CORAL GABLES FL		5.4 CITY - S					
HTLF	AS	DELETE	6 1 TITLE				Change	Addition
NAME	FRANZESE, NICHOLAS		6.2 NAME			_	-	

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 eath; 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 floor 3 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

64 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

0/1Y - \$* - 7/2

5288 S.W. 92ND TERR.

COOPER CITY FL

George E. Rios, Secretary/Treasurer

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/96 Date

(305)829-0700

Daytme Phone ≢