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 # **694045** **(6)**

1. Corporate Name

SOUTHWEST PAVING COMPANY, INC.

Principal Place of Business

8000 NW 74TH STREET
MEDLEY FL 33166

Mailing Address

8000 NW 74TH STREET
MEDLEY FL 33166

3. Date Incorporated or Qualified: **07/10/1981**

3a. Date of Last Report: **01/30/1995**

4. FEI Number: **NOT APPLICABLE** ☐ 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

21
22 Street Address
23 City & State
24 Zip | 25 County

2a. Mailing Address

26 **P.O. Box 660596**
27 Street Address
28 City & State: **Miami Springs, FL**
29 Zip: **33266** | 30 County

9. Name and Address of Current Registered Agent

PARKER, DAVID D.
8000 N W 74ST
MIAMI FL 33166

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 Section 607.0502 or 617.0502, 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. The corporation's board of directors has duly authorized the execution of this statement. I am familiar with and accept the obligations of Section 607.0505 or 617.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

D
PARKER, DAVID D
8000 NW 74TH ST
MIAMI, FL 00000

P
OBRADOR, ANDRES C
8000 NW 74TH ST
MIAMI, FL 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE 1 NAME 1 STREET ADDRESS 1 CITY-ST-ZIP ☐ Change ☐ Addition
2 TITLE 2 NAME 2 STREET ADDRESS 2 CITY-ST-ZIP ☐ Change ☐ Addition
3 TITLE 3 NAME 3 STREET ADDRESS 3 CITY-ST-ZIP ☐ Change ☐ Addition
4 TITLE 4 NAME 4 STREET ADDRESS 4 CITY-ST-ZIP ☐ Change ☐ Addition
5 TITLE 5 NAME 5 STREET ADDRESS 5 CITY-ST-ZIP ☐ Change ☐ Addition
6 TITLE 6 NAME 6 STREET ADDRESS 6 CITY-ST-ZIP ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is true, accurate, and complete, and that this report does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am a duly authorized officer of the corporation or other authorized person to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 with an asterisk (*), or on an attachment with an asterisk.

SIGNATURE: Andres C Obrador — 01/29/96 — (305) 883-8770

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Area Code & Daytime Phone Number

CR2E034 (12/95)