

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 01, 1999 8:00 am  
Secretary of State

03-01-1999 90188 023 \*\*\*158.75

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DOCUMENT # F07060

1. Corporation Name

GANEM CONSTRUCTION CORP., INC.

Principal Place of Business

% IVAN A. GOMEZ  
601 BRICKELL KEY DR., SUITE 507  
MIAMI FL 33131  
US

Mailing Address

% IVAN A. GOMEZ  
601 BRICKELL KEY DR., SUITE 507  
MIAMI FL 33131  
US

2. Principal Place of Business

21 422 Sansovino Avenue

Suite, Apt. #, etc.

22

City & State

23 Coral Gables, Florida

Zip

24 33146

Country

25 USA

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

GOMEZ, IVAN A  
601 BRICKELL KEY DRIVE  
SUITE 507  
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/26/1980

4. FEI Number

59-2061949

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 owes the current year Intangible

Personal Property Tax.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

Ivan A. Gomez, P.A.

82 Street Address (P.O. Box Number is Not Acceptable)

601 Brickell Key Drive

83

Suite 507

84 City

Miami,

FL

85 Zip Code

33131

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

Ivan A. Gomez, P.A. By: [Signature], Pres 1/29/98

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME GANEM, MARLEN

STREET ADDRESS 422 SANSOUINO

CITY-ST-ZIP CORAL GABLES FL

TITLE TDVP ☐ DELETE

NAME GOMEZ, HILDA

STREET ADDRESS 422 SANSOUINO

CITY-ST-ZIP CORAL GABLES FL

TITLE SD ☐ DELETE

NAME GANEM, RAFAEL

STREET ADDRESS 8891 MILLER DRIVE

CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] RAFAEL GANEM

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/4/98

305-412-1200

CR2E034 (11/98)