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

officer or director of the corporation of the Block 12 or Block 13 if changed, or on an

Apr 20 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #**1. Corporation Name F10578 (5) M.C.M. CONTRACTORS, INC Principal Place of Business Mailing Address 0300 NW-68TH-STREET 8999 NW 68TH STREET-MIAMI FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/20/1980 2. Principal Place of Business 2a. Maiting Address 4. FEI Number Applied For 8W Not Applicable 5455 5455 59-2043968 \$8.75 Additional 5. Certificate of Status Desired 205 bure Fee Required 6. Election Campaign Financing \$5.00 May Be MIAM MIRMI Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible USA USA 30 24 Personal Property Tax due June 30. 25 29 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MARTINEZ, MARIO C 50 SW 132ND AVE 62 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33184** 83 84 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 of the purpose of the purpose of changing its registered of the purpose of the purp rich change was authorized by the corporation's board of directors. I hereby accept the appointment as registered clark 607.0505, Florida Statutes. office or registered age agent. I am familiar with, l છ વિશ SIGNATURE (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. PÓS DELETE 11 TITLE Change Addition TITLE MARTINEZ, MARIO C NAME 12 NAME 50 SW 132ND AVE STREET ADDRESS 1.3 STREET ADDRESS MIAMI, FL 00000 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change \_\_ Addition TITLE 2 1 TITLE HERNANDEZ, CARLOS NAME 2.2 NAME 10041 SW 42ND TERRACE STREET ADDRESS 2.3 STREET ADDRESS Miami Fl CITY-ST-ZIP 2.4 C(TY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 THLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change \_\_\_ Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - S1 - ZIP 14. Thereby 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 suppliemental annual report is frue 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 of the processor of the corporation of the processor of the corporation of the processor of the corporation of the corporation of the processor of the corporation of the corporat

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