FILE NOW: FILING FEE AFTER MAY 1 IS \$551

FILED **PROFIT** May 07 1997 8:00am FLORIDA DEPARTMENT **CORPORATION** Sandra B. Mort **ANNUAL REPORT** Secretary of State Secretary of Sta 1997 DIVISION OF CORPORTIONS DOCUMENT # F11336 ORDIALES PLASTERING, INC. Principal Place of Business Mailing Address 4120 S.W. 98TH COURT 4120 S.W. 98TH COURT MIAMI FL 33165 MIAMI FL 33185-5155 3. Date Incorporated or Qualified 3a. Date of Last Report 12/17/1980 02/02/1996 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 59-2050873 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zιρ Country This corporation has liability for intangible tax under s. 199.032. 24 25 Yes No 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ORDIALES, ADOLFO Estevez 4120 SW 98TH COURT 82 Street Address (P.O. MIAMI FL 33165 SW 27th Ave 83 CityMiami 84 Zip Code **3313**S 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 (NOTE: (tegistered Agent signature required when remalating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)Pres. /Treasurer/sec. DOLETE TITLE 1.1 TITLE Change Addition ORDIALES, TOM Tom Ordiales NAME 1.2 NAME **4120 SW 98TH COURT** STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - 7/P K OCLETE TITLE SD Change Addition 2.1 TITLE ORDIALES, GRACIELA NAME 2.2 NAME 4120 SW 98TH COURT STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3 1 111Lf Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - S1 - ZIP DELETE TITLE 4.1 HILE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP · ST- ZIP DELETE TITLE Change Addition NAME STREET ADDRESS EFT ADDRESS CITY-ST-ZIP \$1 - 7IP ■ DELETE TITLE Addition 6.1 NAME 6.2 STREET ADDRESS EL ADDRESS CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the emption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppremental annual report is true and I am an officer or director of the corporation or the receiver or trustee empowered to appears in Block 12 or Block 13 if changed, or on an attachment with an address. curate and that my signature shall have the same legal effect as if made under eath; that cute this report as required by Chapter 607 Florida Statutes, and that my name

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