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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

FILED

Apr 04 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F81035

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SACERIO AND SONS CONSTRUCTION CORP., INC.

Principal Place of Business Mailing Address 10421 SW 141ST DR 10421 SW 141ST DR **MIAMI FL 33178** MIAMI FL 33178-7056 3. Date Incorporated or Qualified 3a. Date of Last Report 05/12/1982 03/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For SAME AS ABOUT 59-2128726 same as above 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SACERIO, ANTONIO 10421 S.W. 141ST DR 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33176** 83 64 City 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 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 +am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. \$IGNATURE gradure Typed or protect name of registered agent and title if approable ered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change 10,6 1.1 TITLE SACERIO, ANTONIO 1.2 NAME NAME 10421 SW 141ST DR STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY - S1 - Zif 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE 101,6 SACERIO, EDILMA 2.2 NAME NAME 10421 SW 141ST DR STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 2. 4 CITY - ST- ZIP CITY - \$1 - ZiP □ DELETE Change Addition Till:E 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 10.6 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - \$1 - 769 4.4 CITY-ST-ZIP DELETE Addition TIFLE 5.1 TITLE 5.2 NAME NAM-5.3 \$TREET ADDRESS STREET ADDRESS 5.4 CITY - \$T - 2iP CHY-S1-ZiP DELETE Change Addition 6.1 TITLE TILLE NAM5 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY - \$1 - 7IP 14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated drying annual report or supplymental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that

receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name