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Feb 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000000816 (7)

1. Corporation Name
JDCA CONSTRUCTION CORPORATION

Principal Place of Business
80 SW 8TH ST., #2801
MIAMI FL 33130

Mailing Address
80 SW 8TH ST., #2801
MIAMI FL 33130-3027



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/20/1995		3a. Date of Last Report 02/19/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 88-0064156		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent FRANQUI, ELSA 80 SW 8TH ST., #2801 MIAMI FL 33130				10. Name and Address of New Registered Agent			
				81 Name Raidl, Christina M.			
				82 Street Address (P.O. Box Number is Not Acceptable) 80 S.W. 8th St., Suite 2801			
				83			
				84 City Miami			
				85 Zip Code FL 33130			
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 and agree to be bound by and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE <i>Christina M. Raidl</i>				DATE 2/18/97			

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DP	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MATSUKURA, NOBUYUKI			1.2 NAME			
STREET ADDRESS	80 S.W. 8TH STREET, SUITE #2801			1.3 STREET ADDRESS			
CITY - ST - ZIP	MIAMI FL			1.4 CITY - ST - ZIP			
TITLE	ST	<input checked="" type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	FRANQUI, ELSA M			2.2 NAME			
STREET ADDRESS	80 S.W. 8TH STREET, #2801			2.3 STREET ADDRESS			
CITY - ST - ZIP	MIAMI FL			2.4 CITY - ST - ZIP			
TITLE	V	<input type="checkbox"/> DELETE		3.1 TITLE	V/T/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BERLANT, JOEL M.			3.2 NAME			
STREET ADDRESS	80 S.W. 8TH STREET, SUITE #2801			3.3 STREET ADDRESS			
CITY - ST - ZIP	MIAMI FL			3.4 CITY - ST - ZIP			
TITLE	AS	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	VLIET, RICHARD F.			4.2 NAME			
STREET ADDRESS	80 S.W. 8TH STREET, SUITE 2801			4.3 STREET ADDRESS			
CITY - ST - ZIP	MIAMI FL			4.4 CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME				5.2 NAME	Ohmura, Shinji		
STREET ADDRESS				5.3 STREET ADDRESS	80 S.W. 8th St., Suite 2801		
CITY - ST - ZIP				5.4 CITY - ST - ZIP	Miami, FA		
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME				6.2 NAME	Raidl, Christina M.		
STREET ADDRESS				6.3 STREET ADDRESS	80 S.W. 8th St., Suite 2801		
CITY - ST - ZIP				6.4 CITY - ST - ZIP	Miami, FA		

14. I do 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.

SIGNATURE: *Christina M. Raidl* CHRISTINA M. RAIDL SECRETARY 2/18/97 305-536-3311
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)