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Feb 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000004390 (9)

1. Corporation Name
CEMEX CARIBE, INC.



Principal Place of Business

1600 S.E. 17TH STREET, SUITE 418
FORT LAUDERDALE FL

Mailing Address

1600 S.E. 17TH STREET, SUITE 418
FORT LAUDERDALE FL 33316-1717

3. Date Incorporated or Qualified
09/11/1995

3a. Date of Last Report
06/28/1996

2. Principal Place of Business

21 6700 N. ANDREWS AVE
Suite Apt. # etc.

22 200
City & State

23 FT. LAUDERDALE, FL
Zip Country

24 33309 25 USA

26. Mailing Address

26 6700 N. ANDREWS AVE.
Suite Apt. # etc.

27 200
City & State

28 FT. LAUDERDALE, FL
Zip Country

29 33309 30 USA

4. FEI Number

APPLIED FOR 65-0613541

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME GONZALEZ, ALEJANDRO
STREET ADDRESS 1600 S.E. 17TH STREET, SUITE 418
CITY-ST-ZIP FORT LAUDERDALE FL

TITLE V
NAME VIEJO, JAVIER
STREET ADDRESS 1600 S.E. 17TH STREET, SUITE 418
CITY-ST-ZIP FORT LAUDERDALE FL

TITLE SD
NAME VILLARREAL, RAMIRO
STREET ADDRESS 1600 S.E. 17TH STREET, SUITE 418
CITY-ST-ZIP FORT LAUDERDALE FL

TITLE D
NAME DOMENE, JOSE
STREET ADDRESS 1600 S.E. 17TH STREET, SUITE 418
CITY-ST-ZIP FORT LAUDERDALE FL

TITLE D
NAME CABALLERO, GUSTAVO
STREET ADDRESS 1600 S.E. 17TH STREET, SUITE 418
CITY-ST-ZIP FORT LAUDERDALE FL

TITLE T
NAME VILLAREAL, MANUEL
STREET ADDRESS 1600 S.E. 17TH STREET, SUITE 418
CITY-ST-ZIP FORT LAUDERDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME GONZALEZ, ALEJANDRO
1.3 STREET ADDRESS 6700 N. ANDREWS AVE, SUITE 200
1.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33309

2.1 TITLE V
2.2 NAME VIEJO, JAVIER
2.3 STREET ADDRESS 6700 N. ANDREWS AVE, SUITE 200
2.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33309

3.1 TITLE SD
3.2 NAME VILLARREAL, RAMIRO
3.3 STREET ADDRESS 6700 N. ANDREWS AVE, SUITE 200
3.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33309

4.1 TITLE D
4.2 NAME DOMENE, JOSE
4.3 STREET ADDRESS 6700 N. ANDREWS AVE, SUITE 200
4.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33309

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE T
6.2 NAME VILLARREAL, MANUEL
6.3 STREET ADDRESS 6700 N. ANDREWS AVE, SUITE 200
6.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33309

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Manuel Villarreal

2/6/97 (954) 202-1600

Date

Daytime Phone #

CR2E034 (9/96)