## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

	1996			tary of State CORPORATIONS		
DOCU	MENT #	G31504	(5)			
•		g systems, inc	` •			
13/311	ONAL BUILDIN	G STSTEMS, INC	j.		i (Bānir) Bēas dien nobel boni b	AND AND CORE AND COME AND COME AND COME
Principal Place		1	Mailing Address		1 100/11/1 0000 ((((0) (100) 0)))))	onin asar asest arate didus gibit Atâte Billi têbi
340 WEST 78TH ROAD HIALEAH FL 33014			340 WEST 78TH ROA HIALEAH FL 33014	AD		
			THACEAN TE GOOT			
					<ol> <li>Date Incorporated or Qualified 04/01/1983</li> </ol>	3a. Date of Last Report 01/26/1995
	ace of Business	2:	a. Mailing Address		4. FEI Number	Applied For
	N 78 TA R	010 26	4 <u></u>		65-0045201	Not Applicable
Suite, Apt. 22	#, etc. ~/A	27	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State			City & State		6 Floating Council F	Fee Required
23 Inples	oli, Flor	100 28	1 '		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
- Zip ごこ <b>ラ</b> ッカ・	Co	untry	7 <sub>I</sub> p	Country	8. This corporation has liability for	
24 <b>3</b> 301		157 29 Idress of Current Regi		30	Florida Statutes	No
	g. Morne and Ac	acress of Current Negi	stereu Agent	B1 Name	10. Name and Address of New F	Registered Agent
D'AND	REA, FRANCIS J	JR.				
340 NW 78TH ROAD HIALEAH FL 33014				82 Street Add	ress (P.O. Box Number is Not Acceptab	(ek
				83		
				84 City		OF To Code
** Discount 6				1-1		FL 85 Zip Code
familiar wit	ed agent, or both, in h, and accept the ob FRAW CIS _ 3	the State of Florida, Suc pligations of, Section 607 DIN OREA arms of registered agent and tide is	JO VRISI	DONT	ration submits this statement for the pur rd of directors. I hereby accept the appu	ointment as registered agent. I am
	Styriating typed or printed o	orne of registered agent and title in OFFICERS AND DIRE				DATE
TITLE	PD	OFFICE NO AND DIRE	DELETE	13. 3 1 TITLE	ADDITIONS/CHANGES TO OFF	
NAME	D'ANDREA, I	FRANCIS J. JR.	_	1.2 NAME		Change Addition
STREET ADDRESS	340 WEST 7			1 3 STREET ADDRESS		
C/IY-SI_Z/	HIALEAH, FL	00000		14 CITY-ST-ZIP		
1414	DIANIDDEA	MITHONIV	☐ DELETE	2 1 TITLE		☐ Change ☐ Addition
NAME STREET AODRESS	D'ANDREA, A 340 West 76			2 2 NAME		
City-St ZP	HIALEAH FL	שאטוווווע		2 3 STREET ADDRESS		
Tillet			DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		Change Addition
NAME			•	3 2 NAME		Change Addition
STHEE! ADDRESS				3.3 STREET ADDRESS		
City - St - Ziet				3 4 CITY-ST-ZIP		
TOLE NAME			DETELL	4. 1 Title		Change Addition
STREET ADDRESS				4.2 NAME		
City - St - ZiF				4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		İ
T/IT,#			☐ DELETE	5 1 TITLE		Change Addition
NAME				5.2 NAME		
STHEFT ADDRESS				53 STREET ADDRESS		
CHY-ST ZiP			Flores	5 4 CiTY-ST-ZIP		
THUE				6 1 TITLE		
NAME			DELETE			Change Addition
NAME S'RELLADURESS			[] DEFEIF	6.2 NAME		Change Add/tion
STHEET ADDIFESS DOTY-ST. ZIP				6 2 NAME 6 3 STREET ADDRESS 6 4 CITY - ST - ZIP	or the exemption stated in Section 119.0	

oath; that I am an officer or direct appears in Block 12 or Block 13 in tor of the comporation or the receiver or fustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name inchanged, or on an attachment with an address.

SIGNATURE:

ED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/96
Dute Destrue Prone #

CR2E034 (12/95)