

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 15 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 # H84121 (3) 1. Corporation Name: GENERAL CONTRACTORS & CONSTRUCTION MANAGEMENT, I NC.																																																																																																																																																											
Principal Place of Business: 7390 S.W. 116 TERRACE MIAMI FL 33156			Mailing Address: 7390 S.W. 116 TERRACE MIAMI FL 33156-4663																																																																																																																																																								
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 11/05/1985 3a. Date of Last Report 07/03/1996 4. FEI Number 59-2677960 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 NIROOMANDRAD, AKRAM 7390 S.W. 116 TERRACE MIAMI FL 33156			10. Name and Address of New Registered Agent 81 Name Akram Niroomand-Rad 82 Street Address (P.O. Box Number is Not Acceptable) 7390 S.W. 116 Terr. 83 miami 84 City Miami FL 85 Zip Code 33156																																																																																																																																																								
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 _____ DATE _____ (Signature required when reinstating)																																																																																																																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3">12. OFFICERS AND DIRECTORS</th> <th colspan="3">13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</th> </tr> <tr> <td>TITLE</td> <td>DP</td> <td>☐ DELETE</td> <td>1.1 TITLE</td> <td colspan="2">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>NIROOMANDRAD, AKRAM</td> <td></td> <td>1.2 NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td>7390 SW 116 TERR</td> <td></td> <td>1.3 STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI FL</td> <td></td> <td>1.4 CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ DELETE</td> <td>2.1 TITLE</td> <td colspan="2">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>2.2 NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>2.3 STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>2.4 CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ DELETE</td> <td>3.1 TITLE</td> <td colspan="2">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>3.2 NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>3.3 STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>3.4 CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ DELETE</td> <td>4.1 TITLE</td> <td colspan="2">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>4.2 NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>4.3 STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>4.4 CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ DELETE</td> <td>5.1 TITLE</td> <td colspan="2">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>5.2 NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>5.3 STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>5.4 CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ DELETE</td> <td>6.1 TITLE</td> <td colspan="2">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>6.2 NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>6.3 STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>6.4 CITY-ST-ZIP</td> <td colspan="2"></td> </tr> </table>						12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			TITLE	DP	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition		NAME	NIROOMANDRAD, AKRAM		1.2 NAME			STREET ADDRESS	7390 SW 116 TERR		1.3 STREET ADDRESS			CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP			TITLE		☐ DELETE	2.1 TITLE	☐ Change ☐ Addition		NAME			2.2 NAME			STREET ADDRESS			2.3 STREET ADDRESS			CITY-ST-ZIP			2.4 CITY-ST-ZIP			TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition		NAME			3.2 NAME			STREET ADDRESS			3.3 STREET ADDRESS			CITY-ST-ZIP			3.4 CITY-ST-ZIP			TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition		NAME			4.2 NAME			STREET ADDRESS			4.3 STREET ADDRESS			CITY-ST-ZIP			4.4 CITY-ST-ZIP			TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition		NAME			5.2 NAME			STREET ADDRESS			5.3 STREET ADDRESS			CITY-ST-ZIP			5.4 CITY-ST-ZIP			TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition		NAME			6.2 NAME			STREET ADDRESS			6.3 STREET ADDRESS			CITY-ST-ZIP			6.4 CITY-ST-ZIP		
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CR2E034 (9/96)

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; that 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 I am a director, or on an attachment with an address.

SIGNATURE: _____

1-9-97