FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

APPROVED AND FILED

95 MAY 22 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

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

DOCUMENT # **J60600** **(0)**

1. Corporate Name
CARRIB CONSTRUCTION CO.

Principal Place of Business	Mailing Address
5777 BROOKGREEN AVE. P O BOX 555758 ORLANDO FL 32855	5777 BROOKGREEN AVE. P O BOX 555758 ORLANDO FL 32855

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **03/06/1987**
3a. Date of Last Report: **04/29/1994**

21 2. Principal Place of Business
26 2a. Mailing Address
4. FEI Number: **59-2851894** [ ] Applied For [ ] Not Applicable
22 Suite, Apt. # or Bldg.
27 Suite, Apt. # or Bldg.
5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required
23 City & State
28 City & State
6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees
24 Zip 25 County
29 Zip 30 County
8. This corporation has only the authority to engage in those business activities permitted by Florida Statutes: [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

SOLOMON, JENNIE
5777 BROOKGREEN AVE.
ORLANDO FL 32806

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 Section 607.0505, 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. The changes are 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

12. OFFICER AND/OR DIRECTOR	13. ADDITIONAL CHANGES TO OFFICER AND/OR DIRECTOR
P THOMPSON, LASCELL 1300 S. RIO GRANDE ORLANDO FL	[ ] Change [ ] Addition
	[ ] Change [ ] Addition
	[ ] Change [ ] Addition
	[ ] Change [ ] Addition
	[ ] Change [ ] Addition
	[ ] Change [ ] Addition

14. The undersigned certify that the information supplied with this filing is absolutely true and correct and 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 13 above, or on an attachment with an added.

SIGNATURE: *Lascell Thompson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/15/95 (Date) 407 352-1360 (Telephone Number)

0418780 FP