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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT

K04819

(4)

| TOMAS | LUIS BUILDING CONTRA | | | | | |
|--|---|---|-----------------------------------|---------------------------------------|---|---|
| Principal Place 15821 SW 147 MIAMI FL 3317 | AVE. | Mailing Address 15821 SW 147 AVE. MIAMI FL 33187-0611 | | | I 142 (211) 314 23111 E1501 E154 11040 1014 | BIBLI GIBLI BIBLI BIBLI BIBLI GIBLI (499) |
| | | | | | 3. Date Incorporated or Qualified 12/03/1987 | 3a. Date of Last Report 01/25/1996 |
| 2. Principal P | ace of Business | 2a. Mailing Address | | | 4. FEI Number | Applied For |
| | | 26 | L | | 65-0015976 | Not Applicable |
| Suite, Apt. #, etc. | | <u>├</u> | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | | City & State | | | | |
| 23 28 | | | ny d State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | Zip | Country | · · · · · · · · · · · · · · · · · · · | 8. This corporation has liability for it | |
| 24 | 25 | 29 | 30 | | | Yes No |
| | 9. Name and Address of Curr | ent Registered Agent | <u> </u> | | 10. Name and Address of New Reg | gistered Agent |
| | CHUSIFYOUCAN, INC. | | 81 | Name | | |
| | 21 SW 40 STREET | | 82 | Street Addr | ess (P.O. Box Number is Not Acceptab | le) |
| MIA | MI FL 33165 | | | 0,100,7144 | | |
| | | | 83 | | | |
| | | i i | 84 | City | ······································ | 85 Zip Code |
| | | · | | , | <u> </u> | FL III |
| 11. Pursuant | to the provisions of Sections 607 0 | 502 and 607,1508, Florida Statute | es, the above | e-named corp | oration submits this statement for the p | urpose of changing its registered |
| agent. La | m familiar with, and accept the obi | igations of, Section 607.0505, Flo | orida Statutes | гина согроган 3. | ion's board of directors. I hereby accep | it the appointment as registered |
| SIGNATURE | | | | | | |
| | Signature: Typed or pented name of registered | | | ent signature require | ed when reinstating) | DATE |
| 12. | OFFICERS A | ND DIRECTORS DELETE | 13. | | ADDITIONS/CHANGES TO OFFIC | Change Addition |
| TITLE | LUIS, TOMAS | rm nerete | 1.1 TITLE | | | Clarge C Applicati |
| NAME | 15821 SW 147 AVE. | | 1.2 NAME 1.3 STREET ADDRESS | | | |
| SIREET ADORESS | MIAMI FL 33177 | | 1 | 1 | | |
| CITY-ST-ZIP TITLE | VP | DELETE | 1.4 CITY-ST-ZIP 2.1 TITLE | | ···· | Change Addition |
| | LUIS, MANUEL | C Dett. (c | 2.1 THE 2.2 NAME | | | Change E Application |
| NAME PARKET - DOOLOG | 15821 SW 147 AVE. | | | 1000coc | | |
| STREET ADDRESS | MIAM! FL 33177 | | 2.3 STREET ADDRESS | | | , |
| City-St-ZiP Title | S | DELETE | 2. 4 CITY - ST - ZIP 3.1 TITLE | | | Change Addition |
| NAME | CALZADILLA, RAUL | And Detect | 3.2 NAME | | | |
| STREET ADDRESS | 7580 SW 104 STREET | | 3.3 STREET | ADDRESS | | |
| CITY-ST-ZIP | MIAMI FL 33176 | | 3.4 CITY- | | | |
| 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 | 51 TITLE | | | Change Addition |
| NAME | | | 52 NAME | | | |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS | | |
| City-St-ZiP | | | 5.4 CITY - 9 | ST-ZIP | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | | | |
| STREET ADORESS | | | 6.3 STREET | ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CITY - 5 | ST-ZIP | | |

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 ehanged, or on an attachment with an address

SIGNATURE:

FILED

Jan 23 1997 8:00am

Secretary of State