

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

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State Tallahassee, Florida 32399-0400
--------------------------------------	---	---

DOCUMENT # **K18868** (5)
ALHAMBRA ROOFING & INSULATION CORP.

APPROVED
AND
FILED

50 MAY -1 1995 5:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

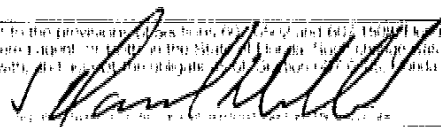
Principal Office Address 362 MINORCA AVE CORAL GABLES FL 33134 US	Mailing Address 362 MINORCA AVE CORAL GABLES FL 33134 US
---	--

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/23/1988		3a. Date of Last Report 02/17/1994	
2. Previous Year's Information 21. 745 NW 54 ST		2a. Mailing Address 26. 745 NW 54 ST	
22. MIAMI FL		27. MIAMI FL	
23. 33127		28. USA	
24. 33127		29. USA	
25. USA		30. USA	
4. FET Number 65-0038254		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	
7. This corporation has failed to incorporate by Chapter 136, Florida Statutes ☒ Yes ☐ No			

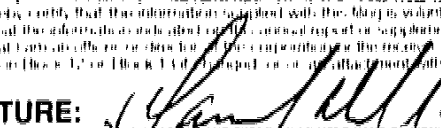
9. Name and Address of Current Registered Agent DEL SOL, DANIEL 362 MINORCA AVE CORAL GABLES FL 33134		10. Name and Address of New Registered Agent 81. Name DEL SOL, DANIEL 82. Street Address (P.O. Box Number is Not Acceptable) 745 NW 54 ST 83. 84. City MIAMI FL 85. Zip Code 33127	
---	--	---	--

11. Pursuant to the provisions of Sections 220.01 and 220.02, Florida Statutes, the officer named corporation submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. This change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am authorized to execute and file this statement and any other documents required by the Florida Statutes.

SIGNATURE:  Daniel DEL SOL 4-4-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	
OFFICE	PD DEL SOL, DANIEL 433 CADAGUA ST CORAL GABLES FL	1. NAME	PD DEL SOL DANIEL 8651 N.E. 10 CT. MIAMI FL 33138
NAME	V BUERGO, OMAR 9102 SW 139 CT MIAMI FL	2. NAME	10510 SW 42 ST MIAMI FL 33165
STREET ADDRESS		3. NAME	
CITY		4. NAME	
STATE		5. NAME	
ZIP		6. NAME	
		7. NAME	
		8. NAME	
		9. NAME	
		10. NAME	
		11. NAME	
		12. NAME	
		13. NAME	
		14. NAME	
		15. NAME	
		16. NAME	
		17. NAME	
		18. NAME	
		19. NAME	
		20. NAME	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 220.02, Florida Statutes. I further certify that the information included on this annual report or supplemental filing 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 this corporation or the means of limited partnership to indicate this report as required by Chapter 220, Florida Statutes, and that my name appears in the 12 or 13 of the 14 of the report or on an attached most fully certified.

SIGNATURE:  Daniel DEL SOL 4-4-95 (305) 471-1610