

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

PROFIT CORPORATION ANNUAL REPORT AMENDED 1999		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # K58279

1. Corporation Name

FLAGLER BUILDERS CORPORATION

Principal Place of Business

717 Ponce de Leon Blvd.
Suite 234
Coral Gables, FL 33134

Mailing Address

Same

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/13/1989

4. FEI Number
65-0177169

Applied For
☐ Not Applicable

6. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

8. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

28 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FABRE, FRANK R. S.
717 Ponce de Leon Blvd., #234
Coral Gables, Florida 33134

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 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

10/25/99

Signature of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSD
NAME HENRIQUEZ, MARIO E.
STREET ADDRESS 151 Crandon Blvd., #1100
CITY-ST-ZIP Key Biscayne, FL 33149

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PSD
1.2 NAME ROBLES, WINSTON
1.3 STREET ADDRESS Calle 50 Edif. Bancomer, 19th Floor
1.4 CITY-ST-ZIP Panama, Republic of Panama

☒ Change ☐ Addition

2.1 TITLE AS
2.2 NAME FABRE, FRANK R. S.
2.3 STREET ADDRESS 717 Ponce de Leon Blvd., #234
2.4 CITY-ST-ZIP Coral Gables, FL 33134

☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I 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 changed, or on an attachment with an address.

SIGNATURE:

FRANK R. S. FABRE Assistant Secretary 10/25/99 305 446-3266

Date

Daytime Phone # 0182100