FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED PROFIT** Jan 27 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** (1)L11415 ZURQUI CONSTRUCTION SERVICE, INC. Principal Place of Business Mailing Address 10421 NE 28 ST 10121 NE 20 ST ... UNIT 102-D UNIT 102-D DO NOT WRITE IN THIS SPACE MIAMI FL 33172 MIAMI FL 33172 3. Date Incorporated or Qualified us 08/25/1989 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For N.W. 28 Street N.W. 28 Street Not Applicable 26 65-0139632 \$8.75 Additional X 5. Certificate of Status Desired 102-0 Fee Required 27 **\$5.00** May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year intangible 25 29 30 Personal Property Tax due June 30. X Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GONZALEZ, EDDY, JR 11985 SW 92 LN Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33186 83 Zip Code nd 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered florida Sugni change was authorized by the corporation's board of directors. I hereby accept the appointment as registered as a figure of corporation of the corporation of t 11. Pursuant to the p SIGNATURE 12. DELETE Addition TITLE 1.1 TITLE GONZALEZ, EDDY, JR NAME 1.2 NAME 8401 SW 92ND STREET 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE STD ☐ Change ☐ Addition GONZALEZ, ANA NAME 2.2 NAME 8401 SW 92ND STREET STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 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 DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

SIGNATURE:

TIME

NAME

STREET ADDRESS

□ DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 by Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report as 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 of the

Change

Addition