

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montague
Secretary of State
Division of Corporations

APPROVED
AND
FILED

DOCUMENT # **L23732** (5)

1. Corporation Name

JMC CONSTRUCTION SERVICES, INC.

95 MAY 1 11 06

TALLAHASSEE, FLORIDA

Principal Place of Business

**25 SE 2ND AVE
SUITE 220
MIAMI FL 33131**

Mailing Address

**25 SE 2ND AVE
SUITE 220
MIAMI FL 33131**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/17/1989	3a. Date of Last Report 03/18/1994
4. FEI Number 65-0150554	☐ 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
6. This corporation has taken any required fees under Chapter 220, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State Apt # etc. 22	26. 988 NW 114th Ave.
22. City & State 23	27. City & State
24	28. Coral Springs, Florida
25	29. 33071
30	USA

9. Name and Address of Current Registered Agent

**ROSEN, BORIS
25 SE 2ND AVE
SUITE 220
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	FL
83.	
84. City	

11. Pursuant to the provisions of sections 607.0602 and 607.1504, Florida Statutes, this 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 this corporation's board of directors. I hereby accept this appointment as registered agent. I am hereby authorized to execute all the necessary documents to effect this change.

SIGNATURE

(Signature of Registered Agent or Change of Registered Agent)

(Signature of Registered Agent or Change of Registered Agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGE TO OFFICERS AND DIRECTORS	
NAME	DPC CUTZ, JOSE MATIAS 25 SE 2ND AVE #220 MIAMI FL	1. NAME	☐ Change ☐ Add
ADDRESS	25 SE 2ND AVE #220 MIAMI FL	2. NAME	
DATE		3. NAME	
NAME	DVT CUTZ, ROBERTO 25 SE 2ND AVE #220 MIAMI FL	4. NAME	☐ Change ☐ Add
ADDRESS	25 SE 2ND AVE #220 MIAMI FL	5. NAME	
DATE		6. NAME	
NAME	DV Y LANIADO, ELLIS B. 25 SE 2ND AVE #220 MIAMI FL	7. NAME	☐ Change ☐ Add
ADDRESS	25 SE 2ND AVE #220 MIAMI FL	8. NAME	
DATE		9. NAME	
NAME	DV DE SA, ROBERTO ALVAREZ 25 SE 2ND AVE #220 MIAMI FL	10. NAME	☒ Change ☐ Add
ADDRESS	25 SE 2ND AVE #220 MIAMI FL	11. NAME	
DATE		12. NAME	
NAME		13. NAME	☐ Change ☐ Add
ADDRESS		14. NAME	
DATE		15. NAME	
NAME		16. NAME	☐ Change ☐ Add
ADDRESS		17. NAME	
DATE		18. NAME	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, for the filing fees stipulated in the laws of the State of Florida. I hereby declare, under penalty that the information furnished in this filing is true and correct, and that any corporation which has taken any required fees under the laws of the State of Florida, and that the undersigned is an officer or director of the corporation or the registered agent of the corporation, and that the undersigned is not a resident of the State of Florida, and that the undersigned is not a resident of the State of Florida, and that the undersigned is not a resident of the State of Florida.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roberto Cutz

4/25/95

(301) 344-9367