ANNUA	ROFIT ORATION LL REPORT 996	Sandr Secre	ARTMENT OF STATE a B Mortham etary of State F CORPORATIONS		
CUM Orporation N	IENT # L896	886 (4)			
CARRIBE	EAN DEMOLITION, IN	C.		I LOGINGE HALTRUS BUG BUG FLANTER	
ipal Place o	of Business	Mailing Address		1 10611011 001 18116 18110 01101 10110	0311 9481 <b>310</b> 11 97911 81811 01311 61011 1901
3 SW 9TH 1 July FL 3317		9023 SW 9TH TER MIAMI FL 33174		Date Incorporated or Qualified	3a. Date of Last Report
rincinal Pla	ce of Business	2a, Mailing Address		07/30/1990 4. FE! Number	06/06/1995 Applied For
		26 Suite, Apt #, etc		65-0209550	Not Applicable
uite, Apt. #.	, etc.	27		Certificate of Status Desired     Betection Campaign Financing	Fee Required  \$5.00 May Be
ty & State		City & State		Trust Fund Contribution	Added to Fees
p	Country 25	Ζιρ <b>29</b>	Country 30	This corporation has liability for Florida Statutes	Y Yes No
	9. Name and Address of C		81 Name	10. Name and Address of New F	Registered Agent
	MI FL 33174		84 City		FL 85 Zip Code
Pursuant to office or re agent 1 an	o the provisions of Sections 6 gistered agent, or both, in the n familiar with, and accept the	e State of Fioritial Such change we obligations of, Section 607.0505	atutes, the above-named corporal	poration submits this statement for the tion's board of directors. Thereby acce mediation renstring)	purpose of changing its registered the appointment as registered
Pursuant to fuse or re agent 1 an	o the provisions of Sections 6i gistered agent, or both, in the in familiar with, and accept the Signature typed or or advisor of region OFFICE	e State of Fioritial Such change we obligations of, Section 607.0505	atules, the above-named corras authorized by the corporato, Florida Statules  (NOTE Registered Agent signature rep.	med #1 en reinstating)	purpose of changing its registered the appointment as registered that the purpose of the purpose
Pursuant to office or reagent 1 an	o the provisions of Sections 6 gistered agent, or both, in the infamiliar with, and accept the Signature typed over modificate of region OFFICE ST SMITH, LUIS C	e State of Funding Such Change is a bloom of Social Such and the diagnostic of Social Such and Direct applicable Social Social Such and Direct ORS DELETIONS	atules, the above-named corras authorized by the corporato, Florida Statules  (NOTE Registerica Agent signature rep.  13.  1.1 TILLE  1.2 NAME	med #1 en reinstating)	purpose of changing its registered the appointment as registered that the purpose of the pointment as registered that the purpose of the purp
Pursuant to office or re agent 1 an NATURE	o the provisions of Sections 6/spistered agent, or both, in the figure of the section of the sec	e State of Funding Such Change is a bloom of Social Such and the diagnostic of Social Such and Direct applicable Social Social Such and Direct ORS DELETIONS	atules, the above-named corras authorized by the corporat, Florida Statutes  (h01+ Registered Agent signature rep.  13.  1.1 TILLE	med #1 en reinstating)	purpose of changing its registered ppr the appointment as registered care.  CALE FICERS AND DIRECTORS IN 12 Change AddIn
Pursuant to office or re agent 1 an NATURE	o the provisions of Sections 6 spistered agent, or both, in the find familiar with, and accept the Signature special control of region of the ST SMITH, LUIS C C/O 9023 S.W. 9TH TI MIAMI FL 33174	e State of Funding Such Change is a bloom of Social Such and the diagnostic of Social Such and Direct applicable Social Social Such and Direct ORS DELETIONS	atules, the above-named corras authorized by the corporation, Florida Statutes  (NOTE Registerica Agent signature rep.  13. 1.1 TIFLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY: ST-ZIP  E 2.1 TIFLE	med #1 en reinstating)	purpose of changing its registered par the appointment as registered that the appointment as registered the appointment as registered that the appointment as registered the appointment as registered the appointment as registered the appointment as registered that the appointment as registered th
Pursuant to office or re agent 1 an NATURE	o the provisions of Sections 6/spistered agent, or both, in the figure of the section of the sec	e obligations of, Section 607 0505 beet agent and third applicable RS AND DIRECTORS DELETI	atules, the above-named corras authorized by the corporato, Florida Statutes  (NOTE Registerica Agent signature rep.  13.  1.1 TIFLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP	med #1 en reinstating)	purpose of changing its registered ppr the appointment as registered care.  CALE FICERS AND DIRECTORS IN 12 Change AddIn
Pursuant to office to the agent of an analysis of the agent of the age	o the provisions of Sections 6 gistered agent, or both, in the figure and accept the Signature special control accept the OFFICE ST SMITH, LUIS C C/O 9023 S.W. 9TH TI MIAMI FL 33174 V CORZO, CARLOS P	e obligations of, Section 607 0505 beet agent and third applicable RS AND DIRECTORS DELETI	atules, the above-named corras authorized by the corporation, Florida Statutes  (NOTH Registerica Agent signature rep.  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  E 2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY - ST - ZIP	med #1 en reinstating)	purpose of changing its registered purpose of changing its registered purpose the appointment as registered case.  CASE  Change: Add-in Change Add-in Add-in Change Add-in Add-in Add-in Change Add-in Add-in Add-in Change
Pursuant to office or re agent I an NATURE : ET ADDRESS ST-ZIP : ET ADDRESS : ST-ZIP :	o the provisions of Sections 6 spistered agent, or both, in the namiliar with, and accept the Strain by Johnson Strain Sections of Egipton ST SMITH, LUIS C C/O 9023 S.W. 9TH TI MIAMI FL 33174 V CORZO, CARLOS P C/O 9023 S.W. 9TH TI	e obligations of, Section 607 0505 beed agest and the diagnosable RS AND DIRECTORS DELETI  ERR DELETI	atules, the above-named corras authorized by the corporation, Florida Statutes  (NOTE Registerica Agent signature resp.  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP  E 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP  E 3.1 TITLE 3.2 NAME	med #1 en reinstating)	purpose of changing its registered purpose of changing its registered the appointment as registered part of the appointment as registered.    DAIF   Change   Additional part of the appointment as registered.
Pursuant to office or re agent 1 an NATURE	o the provisions of Sections 6 spistered agent, or both, in the namiliar with, and accept the Strain by Johnson Strain Sections of Egipton ST SMITH, LUIS C C/O 9023 S.W. 9TH TI MIAMI FL 33174 V CORZO, CARLOS P C/O 9023 S.W. 9TH TI	e obligations of, Section 607 0505 beed agest and the diagnosable RS AND DIRECTORS DELETI  ERR DELETI	atules, the above-named corras authorized by the corporation, Florida Statutes  (NOTE Registerica Agent signature rep.  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP  E 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP  E 3.1 TITLE	med #1 en reinstating)	purpose of changing its registered purpose of changing its registered to the appointment as registered.  DATE  FICERS AND DIRECTORS IN 12  Change Additional
Pursuant to office of re agent 1 an NATURE T ADDRESS ST-ZIP	o the provisions of Sections 6 spistered agent, or both, in the namiliar with, and accept the Strain by Johnson Strain Sections of Egipton ST SMITH, LUIS C C/O 9023 S.W. 9TH TI MIAMI FL 33174 V CORZO, CARLOS P C/O 9023 S.W. 9TH TI	e obligations of, Section 607 0505 beed agest and the diagnosable RS AND DIRECTORS DELETI  ERR DELETI	abutes the above-named corras authorized by the corporation, Florida Statutes  (NOTE Registerica Agent signature rep.  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP  E 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP  E 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP  E 4.1 TITLE	med #1 en reinstating)	purpose of changing its registered purpose of changing its registered care the appointment as registered.  CALE  CHANGE  Change  Addit  Change  Addit
Pursuant to office or re agent 1 an NATURE	o the provisions of Sections 6 spistered agent, or both, in the namiliar with, and accept the Strain by Johnson Strain Sections of Egipton ST SMITH, LUIS C C/O 9023 S.W. 9TH TI MIAMI FL 33174 V CORZO, CARLOS P C/O 9023 S.W. 9TH TI	estate of Florida Suction 607 0505 cobligations of, Section 607 0505 beed agent and the diapplead-be RS AND DIRECTORS  DELETI  ERR  DELET  DELETI	atules, the above-named corras authorized by the corporation, Florida Statutes  (NOTH Registerica Agent signature resp.  13. 1.1 TIFLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP  E 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP  E 3.1 TIFLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	med #1 en reinstating)	purpose of changing its registered purpose of changing its registered but the appointment as registered but the appointment as registered but the change but
Pursuant to office or reagent 1 an NATURE  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP	o the provisions of Sections 6 spistered agent, or both, in the namiliar with, and accept the Strain by Johnson Strain Sections of Egipton ST SMITH, LUIS C C/O 9023 S.W. 9TH TI MIAMI FL 33174 V CORZO, CARLOS P C/O 9023 S.W. 9TH TI	ERR  DELET	atules, the above-named corras authorized by the corporation, Florida Statutes  (NOT+ Registerica Agent signature resp.  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP  E 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP  E 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP  E 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP	med #1 en reinstating)	purpose of changing its registered pit the appointment as registered  LIATE FICERS AND DIRECTORS IN 12  Change Addition Change Addition Change Addition Change Addition Addition
Pursuant to office or reagent 1 an NATURE = STADDRESS ST-ZIP = ST-	o the provisions of Sections 6 spistered agent, or both, in the namiliar with, and accept the Strain by Johnson Strain Sections of Egipton ST SMITH, LUIS C C/O 9023 S.W. 9TH TI MIAMI FL 33174 V CORZO, CARLOS P C/O 9023 S.W. 9TH TI	estate of Florida Suction 607 0505 cobligations of, Section 607 0505 beed agent and the diapplead-be RS AND DIRECTORS  DELETI  ERR  DELET  DELETI	atules, the above-named corras authorized by the corporation, Florida Statutes  (NOT+ Registerica Agent signature resp.  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP  E 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP  E 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP  E 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP	med #1 en reinstating)	purpose of changing its registered parpose of changing its registered but the appointment as registered.    DATE
Pursuant to office or reagent 1 and NATURE  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  E ADDRESS -ST-ZIP  E ET ADDRESS -ST-ZIP  E ET ADDRESS	o the provisions of Sections 6 spistered agent, or both, in the namiliar with, and accept the Strain by Johnson Strain Sections of Egipton ST SMITH, LUIS C C/O 9023 S.W. 9TH TI MIAMI FL 33174 V CORZO, CARLOS P C/O 9023 S.W. 9TH TI	ERR  DELET	atutes, the above-named corras authorized by the corporato, Florida Statutes  (NOTE Registered Agent signature replication of the corporation of t	med #1 en reinstating)	purpose of changing its registered pit the appointment as registered  LIAIF FICERS AND DIRECTORS IN 12  Change Addition Change Addition Change Addition Change Addition
Pursuant to office or reagent 1 an NATURE  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  E E ADDRESS -ST-ZIP  E E E ADDRESS -ST-ZIP  E E E E ADDRESS	o the provisions of Sections 6 spistered agent, or both, in the namiliar with, and accept the Strain by Johnson Strain Sections of Egipton ST SMITH, LUIS C C/O 9023 S.W. 9TH TI MIAMI FL 33174 V CORZO, CARLOS P C/O 9023 S.W. 9TH TI	ERR  DELET	abutes the above-named corras authorized by the corporation, Florida Statutes  (NOTE Registered Agent signature rep.  13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP  E 21 TILE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP  E 31 TILE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP  E 41 TILE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY - ST - ZIP  E 5.1 TILE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY - ST - ZIP  TE 5.1 TILE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP  TE 5.1 TILE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP  TE 6.1 TILE 5.3 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP  TE 6.1 TILE 5.4 NAME 5.5 STREET ADDRESS 5.4 CITY - ST - ZIP  TE 6.1 TILE 5.4 NAME 5.5 STREET ADDRESS 5.4 CITY - ST - ZIP  TE 6.1 TILE	med #1 en reinstating)	purpose of changing its registered pit the appointment as registered.  LIATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
Pursuant to office or reagent 1 an NATURE  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E E ET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	o the provisions of Sections 6 spistered agent, or both, in the namiliar with, and accept the Strain by Johnson Strain Sections of Egipton ST SMITH, LUIS C C/O 9023 S.W. 9TH TI MIAMI FL 33174 V CORZO, CARLOS P C/O 9023 S.W. 9TH TI	ERR  DELET  DELET  DELET  DELET  DELET  DELET  DELET	atules, the above-named corras authorized by the corporation, Florida Statutes  (NOTH Registered Agent signature term)  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  E 2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY - ST - ZIP  E 3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY - ST - ZIP  E 4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  3.4 CITY - ST - ZIP  E 5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  4.4 CITY - ST - ZIP  F 5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY - ST - ZIP	med #1 en reinstating)	purpose of changing its registered pit the appointment as registered.  LIATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
Pursuant to office or readent 1 and NATURE  E ET ADDRESS -ST-ZIP  E EET ADDRESS -ST-ZIP  E EET ADDRESS (-ST-ZIP  E EET ADDRESS	o the provisions of Sections 6i gistered agent, or both, in the nintered agent, and accept the OFFICE ST SMITH, LUIS C C/O 9023 S.W. 9TH TI MIAMI FL 33174 V CORZO, CARLOS P C/O 9023 S.W. 9TH TI MIAMI FL 33174	ERR  DELET  DELET  DELET  DELET  DELET  DELET  DELET	abutes the above-named corras authorized by the corporation, Florida Statutes  (NOTE Registered Agent signature rep.  13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP  E 2.1 TILE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP  E 3.1 TILE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP  E 4.1 TILE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP  E 5.1 TILE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY - ST - ZIP  TE 5.1 TILE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP  TE 6.1 TILE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP  TE 6.1 TILE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP  TE 6.1 TILE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP  TE 6.3 STREET ADDRESS 5.4 CITY - ST - ZIP  TE 6.3 STREET ADDRESS 5.4 CITY - ST - ZIP	med #1 en reinstating)	purpose of changing its registered put the appointment as registered  LEATE FICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Addition