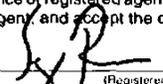
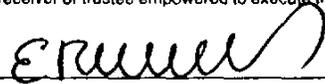


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FILED

MAY 18 PM 3:41

SECRETARY OF STATE
FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company DOCUMENT # 98000000632 Americas Construction Enterprises, d.c. 2520 S.W. 22 Street # 2-380 Miami, FL 33145		1a. Principal Place of Business Address 655 N.W. 36 Street, Suite 1 Miami, FL 33166	
2. Principal Place of Business		2a. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
3. Date Organized or Qualified		3a. State of Formation	
5/18/98		FL	
4. FEI Number		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
65-0836771			
5. Date of Last Report		6. Certificate of Status Desired	
N/A		<input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office	
WAYNE, GEOFFREY M ESQUIRE 1001 BRICKELL BAY DRIVE SUITE 2702 MIAMI FL 33131		Name SEBASTIAN PORRAS Street Address (P.O. Box Number is Not Acceptable) 1101 Brickell Avenue Suite, Apt. #, etc. 800 North Tower City Miami Zip Code FL 33131	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.			
SIGNATURE 		DATE	
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	JESUS ELISEO QUIR	6555 N.W. 36 Street, Suite 1	Miami, FL 33166
MGRM	MARIA F. SUAREZ	6555 N.W. 36 Street, Suite 1	Miami, FL 33166
5/18/98 -05/28/99-01078-009 ****188.75 ****188.75			
AL APR 25 1999			
11. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.			
SIGNATURE: 		4/21/99 305-577-8589	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGER, MEMBER OR MANAGER			