

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # M21407 (5)

1. Corporation Name
A A & G SANDBLASTING, INC.

Principal Place of Business Mailing Address
2545 W. 80 STREET SUITE 18 HIALEAH FL 33016

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **10/02/1985** 3a. Date of Last Report **04/19/1994**

2. Principal Place of Business 2a. Mailing Address
21 1696 West 84th Street 26 1696 WEST 84 STREET

4. FEI Number **59-2585035** Applied For Not Applicable

22 HIALEAH, FLORIDA 27 HIALEAH, FLORIDA

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

23 33014 U.S.A. 28 33014 U.S.A.

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

24 25 29 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ESQUIVEL, GUILLERMO
2522 SW 27 AVE 1
MIAMI FL 33133**

81 Name ESQUIVEL, GUILLERMO
82 Street Address (P.O. Box Number is Not Acceptable) 1696 WEST 84th STREET
83 HIALEAH, FL. 33014
84 City HIALEAH FL 85 Zip Code 33014

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, wholly 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

[Signature]

6/2/94

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD
NAME ESQUIVEL, GUILLERMO
STREET ADDRESS 1696 W 84TH ST
CITY ST ZIP HIALEAH FL

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS SAME
14 CITY ST ZIP

TITLE VSD
NAME ESQUIVEL JR., GUILLERMO
STREET ADDRESS 3191 SW 25 TERR
CITY ST ZIP MIAMI FL

21 TITLE VSD Change Addition
22 NAME ESQUIVEL JR., GUILLERMO
23 STREET ADDRESS 3174 SW 26th ST.
24 CITY ST ZIP MIAMI, FL. 33133

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated in the 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, unchanged, or in other attachment with an address.

SIGNATURE:

[Signature]
NAME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/2/94 306-444-4177