

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 25 AM 9:04

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # M38292 (2)

1. Corporation Name

CENTURY CONSTRUCTION SYSTEMS, INC.

Principal Place of Business

**14079 SW 17 TERR
C/O ROBERTO DIAZ, P.O. BOX 65-3241
MIAMI FL 33175
US**

Mailing Address

**P.O. BOX 65-3241
C/O ROBERTO DIAZ, P.O. BOX 65-3241
MIAMI FL 33265
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/12/1986

3a. Date of Last Report

04/11/1994

4. FEI Number

59-2716015

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**

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

24

25

Country

29

Zip

30

Country

9. Name and Address of Current Registered Agent

**DIAZ, ROBERTO
9125 S.W. 38 ST.
MIAMI FL 33165**

10. Name and Address of New Registered Agent

81 Name

DIAZ, ROBERTO

82 Street Address (P.O. Box Number is Not Acceptable)

14079 SW 17 TERR

83

84 City

MIAMI

FL

85 Zip Code

33135

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, or both, 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

ROBERTO DIAZ, President

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

2-01-95

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	DIAZ, ROBERTO
STREET ADDRESS	9125 S.W. 38 ST.
CITY - ST - ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	☒ Change ☐ Addition
1.2 NAME	DIAZ, ROBERTO	
1.3 STREET ADDRESS	14079 SW 17 TERR	
1.4 CITY - ST - ZIP	MIAMI FL 33175	
2.1 TITLE	VICE PRESIDENT	☐ Change ☒ Addition
2.2 NAME	DIAZ, HIRYA	
2.3 STREET ADDRESS	14079 SW 17 TERR	
2.4 CITY - ST - ZIP	MIAMI FL 33175	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 119.07(3)(k), 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 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 or attached, or on an attachment with an address.

SIGNATURE:

ROBERTO DIAZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-01-95

Date

305.220-6409

Daytime Phone