

FILED

Mar 04 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M47240 (0)

1. Corporation Name  
**ERNESTO RODRIGUEZ CONSTRUCTION, INC.**

Principal Place of Business	Mailing Address
211 N.W. 27TH COURT P O BOX 351627 MIAMI FL 33125-5025	211 N.W. 27TH COURT P O BOX 351627 MIAMI FL 33135-7627 US

3. Date Incorporated or Qualified 02/25/1987	3a. Date of Last Report 01/23/1996
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<b>2.</b> Principal Place of Business		<b>2a.</b> Mailing Address		<b>4.</b> FEI Number <b>59-2810283</b>		Applied For	
<b>21</b>		<b>26</b>				Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<b>5.</b> Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
<b>22</b>		<b>27</b>					
City & State		City & State		<b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
<b>23</b>		<b>28</b>					
Zip	Country	Zip	Country	<b>8.</b> This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>24</b>	<b>25</b>	<b>29</b>	<b>30</b>				

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
RODRIGUEZ, MAGDA L. 211 N.W. 27TH COURT MIAMI FL 33125		81 Name ERNESTO RODRIGUEZ	
		82 Street Address (P.O. Box Number is Not Acceptable) 1313 PONCE DE LEON BLVD # 300	
		83	
		84 City CORAL GABLES	85 Zip Code 33134

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 Robert K. Kadyan 2/27/97  
(Print or typed name of registered agent and title, if applicable) (NOTE: Registered Agent signature required when reinstalling) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RODRIGUEZ, ERNESTO J.</b>		1.2 NAME
STREET ADDRESS	<b>211 N.W. 27TH COURT</b>		1.3 STREET ADDRESS
CITY - ST - ZIP	<b>MIAMI FL</b>		1.4 CITY - ST - ZIP
TITLE	<b>S</b>	<input checked="" type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>RODRIGUEZ, MAGDA L.</b>		2.2 NAME <b>JANET M. RODRIGUEZ</b>
STREET ADDRESS	<b>211 N.W. 27TH COURT</b>		2.3 STREET ADDRESS <b>211 N.W. 27TH COURT</b>
CITY - ST - ZIP	<b>MIAMI FL</b>		2.4 CITY - ST - ZIP <b>MIAMI FL</b>
TITLE		<input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			3.2 NAME
STREET ADDRESS			3.3 STREET ADDRESS
CITY - ST - ZIP			3.4 CITY - ST - ZIP
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			4.2 NAME
STREET ADDRESS			4.3 STREET ADDRESS
CITY - ST - ZIP			4.4 CITY - ST - ZIP
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME
STREET ADDRESS			5.3 STREET ADDRESS
CITY - ST - ZIP			5.4 CITY - ST - ZIP
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY - ST - ZIP			6.4 CITY - ST - ZIP

14. 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 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 if changed, or on an attachment with an address.

SIGNATURE: *Ernesto Rodriguez* ERNESTO RODRIGUEZ 2/27/97 (305) 443-8500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

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