

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **M53789** (7)

1. Corporation Name

**GARMON CONSTRUCTION CORPORATION**



Principal Place of Business

**30 S.W. 19 ROAD  
KEY BISCAINE FL 33129  
US**

Mailing Address

**30 S.W. 19 ROAD  
MIAMI FL 33129  
US**

3. Date Incorporated or Qualified  
**06/08/1987**

3a. Date of Last Report  
**01/25/1995**

2. Principal Place of Business  
21 **30 S.W. 19 ROAD**  
Suite, Apt. #, etc.

2a. Mailing Address  
26 **30 S.W. 19 ROAD**  
Suite, Apt. #, etc.

4. FEI Number  
**65-0028306**

Applied For  
Not Applicable

22 City & State  
23 **MIAMI, FL.**

27 City & State

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

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

24 Zip **33129** Country **U.S.**

29 Zip Country

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

9. Name and Address of Current Registered Agent

**GARCIA MONTES, JORGE  
141 HARBOR DRIVE  
KEY BISCAINE FL 33149**

10. Name and Address of New Registered Agent

81 Name **GARCIA MONTES, JORGE**

82 Street Address (P.O. Box Number is Not Acceptable)  
**501 BAY LANE**

83

84 City **KEY BISCAINE**

FL 85 Zip Code **33149**

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

Signature of the person or persons who are registered agent and the corporation

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE **P**  
1.2 NAME **GARCIA MONTES, JORGE**  
1.3 STREET ADDRESS **141 HARBOR DRIVE**  
1.4 CITY - ST - ZIP **MIAMI FL**

☐ DELETE

2.1 TITLE **V**  
2.2 NAME **GARCIA MONTES, JORGE JR.**  
2.3 STREET ADDRESS **19320 NW 6 ST**  
2.4 CITY - ST - ZIP **PEMBROKE PINES FL**

☐ DELETE

3.1 TITLE **V**  
3.2 NAME **GARCIA MONTES, GUSTAVO**  
3.3 STREET ADDRESS **30 SW 19 RD**  
3.4 CITY - ST - ZIP **MIAMI FL**

☐ DELETE

4.1 TITLE ☐ DELETE

5.1 TITLE ☐ DELETE

6.1 TITLE ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P**  
1.2 NAME **GARCIA MONTES, JORGE**  
1.3 STREET ADDRESS **501 BAY LANE**  
1.4 CITY - ST - ZIP **KEY BISCAINE, FL.**

☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**J. G. Montes Jr.**

**1/17/95**

**305 2859491**

Date

Daytime Phone #

CR2E034 (12/95)