FILE NOW: FILING FEE AFT PROFIT CORPORATION ANNUAL REPORT 1998		FLOHIDA DEP, Sandra Secre	FLOHIDA DEPARTMENT OF STATE Sandre B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED Jan 20 1998 8:00am Secretary of State		
GARM	MENT # M5378 ON CONSTRUCTION CORPO						
7305 NW 36TH STREET 30 S.W. 19 ROAD MIAMI FL 33166 MIAMI FL 33129 US US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
					06/08/1987		
	Principal Place of Business 28. Mailing Address 7315 NW 36 ST 26 7315 NW 36			t	4. FEI Number		Applied For
	/3/3/W 36 31 26 /3/5 NW 30			<u></u>	65-0028306 6. Certificate of Status Desired	·	Not Applicable Additional
2 City & Stat		27 City & State			6. Election Campaign Financing	Fee	Required
3 M19	.m. Florida	28 Miami		ida	Trust Fund Contribution		0 May Be d to Fees
Zip 33\(Lefe 25 VSA	29 33166	30 V	έA	 This corporation owes or has pain Personal Property Tax due June 		Intangible
	9. Name and Address of Curren	t Registered Agent	8	1 Name	10. Name and Address of New Reg	gistered Agent	
GARCIA MONTES, JORGE 501 BAY LANE				82 Street Address (P.O. Box Number is Not Acceptable)			
KEY BISCAYNE FL 33149							
			8	3			
			B	4 City		FL 85 Z	p Code
office or r	egistered agont, or both, in the State im familiar with, and accept the obliga Signature, typed or printed name of registered age	of Florida. Such change was ttions of, Section 607.0505, F	authorized t Iorida Statuti	by the corpora es.	poration submits this statement for the p tion's board of directors. I hereby accep ired when reinstating)	DATE	as registered
12. TITLE	OFFICERS AND		13.	·····	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	
NAME			1.2 NAME				
STREET ADDRESS	501 BAY LANE		1.3 STREE	E1 ADDRESS			
CITY-ST-ZIP TITLE	KEY BISCAYNE FL		1.4 CITY - 2.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	GARCIA MONTES, JORGE JR		2.2 NAME				
STREET ADDRESS	19320 NW 6 ST			et address			
CITY-ST-ZIP TITLE	PEMBROKE PINES FL	DELETE	2. 4 City 3.1 Title		<u> </u>		Addition
NAME	GARCIA MONTES, GUSTAVO		3,2 NAME				
STREET ADDRESS	30 SW 19 RD MIAMI FL			ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY 4.1 TITLE			Change	Addition
NAME			4. 2 NAM	E			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY- 5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY+ST-ZIP TIJLE		DELETE	54 CITY- 6.1 TITLE			Change	Addition
NAME			6.2 NAME	l			
STREET ADDRESS	\sim			ET ADDRESS			
CITY-ST-ZIP	certily that the information supplied w	th this filing does not qualify	for the exem		Soction 119.07(3)(i), Florida Statutes. I further shall have the same legal effect as if	urther certify that th	e information