

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Shirley B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M58217 (4)

1. Corporation Name

BASA CONSTRUCTION CORPORATION



Principal Place of Business

**11405 S.W. 32 ST.
MIAMI FL 33165-2117**

Mailing Address

**11405 S.W. 32 ST.
MIAMI FL 33165-2117**

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**QUINTERO, FRANK, JR.
3400 CORAL WAY STE 500
MIAMI FL 33145**

3. Date Incorporated or Qualified

08/28/1987

3a. Date of Last Report

03/21/1995

4. FEI Number

65-0015350

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 602.0602 and 602.1502, 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, thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 602.0605, Florida Statutes.

SIGNATURE

Signature of Registered Agent or New Registered Agent

Signature of Registered Agent or New Registered Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE	VPD	☐ DELETE
NAME	BASADRE, MARTHA	
STREET ADDRESS	11405 S.W. 32 ST.	
CITY-ST-ZIP	MIAMI FL	
TITLE	PSA	☐ DELETE
NAME	BASADRE-ALVAREZ, LOURDES	
STREET ADDRESS	11405 S.W. 32 ST.	
CITY-ST-ZIP	MIAMI FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	☐ Change ☐ Addition
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	☐ Change ☐ Addition
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	☐ Change ☐ Addition
41 NAME	
42 STREET ADDRESS	
43 CITY-ST-ZIP	☐ Change ☐ Addition
51 NAME	
52 STREET ADDRESS	
53 CITY-ST-ZIP	☐ Change ☐ Addition
61 NAME	
62 STREET ADDRESS	
63 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied is true, correct and complete, and that I am qualified to be the corporation as stated in Section 199.02(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 as a change or as an addition with an address.

SIGNATURE: Lourdes Basadre Alvarez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/96

226-4391
Telephone Number

CR2E034 (12/95)