

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jan 15 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **M83781** (8)  
1. Corporation Name  
**R.T. CONSTRUCTION INTERESTS, INC.**



Principal Place of Business <b>9200 S DADELAND BLVD. STE. #225 MIAMI FL 33156</b>	Mailing Address <b>9200 S DADELAND BLVD. STE. #225 MIAMI FL 33156</b>
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>06/02/1988</b>	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number <b>65-0065060</b>		Applied For <input type="checkbox"/> Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
24 Country	29 Country	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CUMMINGS, F. ALAN  
CUMMINGS LAW FIRM  
1004 DESOTO PARK DRIVE  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

**FL**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BELLERO, CHAFFREDO	1.2 NAME	
STREET ADDRESS	9200 S. DADELAND BLVD. #225	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33156	1.4 CITY-ST-ZIP	
TITLE	DV	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ESPINO, ENRIQUE I.	2.2 NAME	<b>DS ESPINO, ENRIQUE I.</b>
STREET ADDRESS	9200 S. DADELAND BLVD. #225	2.3 STREET ADDRESS	<b>9200 SO. DADELAND BLVD. #225</b>
CITY-ST-ZIP	MIAMI FL 33156	2.4 CITY-ST-ZIP	<b>MIAMI, FL 33156</b>
TITLE	DS	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	IGLESIAS, JUAN J.	3.2 NAME	<b>D.T. IGLESIAS, JUAN J.</b>
STREET ADDRESS	9200 S. DADELAND BLVD. #225	3.3 STREET ADDRESS	<b>9200 SO. DADELAND BLVD. #225</b>
CITY-ST-ZIP	MIAMI FL 33156	3.4 CITY-ST-ZIP	<b>MIAMI, FL 33156</b>
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RECCHI, CLAUDIO	4.2 NAME	
STREET ADDRESS	9200 S. DADELAND BLVD. #225	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33156	4.4 CITY-ST-ZIP	
TITLE	DS	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RECCHI, GIUSEPPE	5.2 NAME	<b>D RECCHI, GIUSEPPE</b>
STREET ADDRESS	9200 S. DADELAND BLVD. #225	5.3 STREET ADDRESS	<b>9200 S. DADELAND BLVD. #225</b>
CITY-ST-ZIP	MIAMI FL 33156	5.4 CITY-ST-ZIP	<b>MIAMI, FL 33156</b>
TITLE		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 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:

*[Signature]*

1-7-98

CR2E034 (10/97)