

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # M83781

1. Corporation Name  
R.T. CONSTRUCTION INTERESTS, INC.

Principal Place of Business  
9200 S DADELAND BLVD.  
STE. #225  
MIAMI FL 33156

Mailing Address  
9200 S DADELAND BLVD.  
STE. #225  
MIAMI FL 33156

**FILED**  
**Feb 09, 1999 8:00am**  
**Secretary of State**

02-09-1999 90014 006 \*\*\*158.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/02/1988

4. FEI Number

65-0065060

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing



\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.



Yes



No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 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  
NAME BELLERO, CHAFFREDO  
STREET ADDRESS 9200 S. DADELAND BLVD. #225  
CITY-ST-ZIP MIAMI FL 33156

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE DS  
NAME ESPINO, ENRIQUE I  
STREET ADDRESS 9200 SO. DADELAND BLVD #225  
CITY-ST-ZIP MIAMI FL 33156

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

TITLE DT  
NAME IGLESIAS, JUAN J  
STREET ADDRESS 9200 SO. DADELAND BLVD #225  
CITY-ST-ZIP MIAMI FL 33156

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

TITLE D  
NAME RECCHI, CLAUDIO  
STREET ADDRESS 9200 S. DADELAND BLVD. #225  
CITY-ST-ZIP MIAMI FL 33156

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

TITLE D  
NAME RECCHI, GIUSEPPE  
STREET ADDRESS 9200 S DADELAND BLVD. #225  
CITY-ST-ZIP MIAMI FL 33156

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
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 with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/18/99 305 670 7585

02-25-99

CR2E034 (11/98)

02-25-99