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 # P92000003398 (4)

1. Corporation Name

~~ANDES CONSTRUCTION INC.~~
ANDES CUSTOM REMODELING, INC.

N/C 12/20/95

Principal Place of Business: 8540 NW 6 LANE, SUITE 101, MIAMI FL 33126

Mailing Address: 8540 NW 6 LANE, SUITE 101, MIAMI FL 33126

3. Date Incorporated or Qualified: 11/10/1992
3a. Date of Last Report: 05/01/1995

4. FEI Number: 65-0368336 ✓ ☐ 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

2. Principal Place of Business
21 1620 NW 114TH AVE
22 Suite, Apt. #, etc. —
23 City & State: PEMBROKE PINES, FLA.
24 Zip: 33026 25 Country: BROWARD

2a. Mailing Address
26 1620 NW 114TH AVE
27 Suite, Apt. #, etc. —
28 City & State: PEMBROKE PINES, FLA.
29 Zip: 33026 30 Country: BROWARD

9. Name and Address of Current Registered Agent

FERRER, ANDRES A
8540 NW 6 LANE
SUITE 101
MIAMI FL 33126

10. Name and Address of New Registered Agent
81 Name: SAME
82 Street Address (P.O. Box Number is Not Acceptable): 1620 N.W. 114 AVENUE
83
84 City: PEMBROKE PINES, FL 85 Zip Code: 33026

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 (In the Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
D	FERRER, ANDRES A	8540 NW 6 LANE, APT 101	MIAMI FL 33126	☐ DELETE
				☐ DELETE
				☐ DELETE
				☐ DELETE
				☐ DELETE
				☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
1	1.1	1.2	1.3	1.4	☐ Change ☐ Addition
2	2.1	2.2	2.3	2.4	☐ Change ☐ Addition
3	3.1	3.2	3.3	3.4	☐ Change ☐ Addition
4	4.1	4.2	4.3	4.4	☐ Change ☐ Addition
5	5.1	5.2	5.3	5.4	☐ Change ☐ Addition
6	6.1	6.2	6.3	6.4	☐ Change ☐ Addition

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***225.00

CR2E034 (12/95)

14. I do 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: Andres Ferrer S
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ANDRES FERRER (PRESIDENT)

Date: 7/29/96 Daytime Phone #: (954) 430-7141