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

PROFIT CORPORATION ANNUAL REPORT

1997

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P92000013513 (6)

C.M.T. CONSTRUCTION, INC.

Principal Place of Business Malling Address  4081 N FEDERAL HWY 8UITE 10 POMPANO BEACH FL 33064  Malling Address  4081 N FEDERAL HWY 8UITE 10 POMPANO BEACH FL 33064-S			064-9217				
<b>.</b>					<ol> <li>Date incorporated or Qualified</li> <li>12/17/1992</li> </ol>	3a. Date of Last Report 05/01/1996	
2. Principal Pi 21	ace of Business	28. Mailing Address 26			4. FEI Number 65-0378645	Applied For Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	<b>3</b>	City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	Zip Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No		
	9. Name and Address of Current	Registered Agent	· · · · · · · · · · · · · · · · · · ·		10. Name and Address of New Re	gistered Agent	
TERI	RANA, MICHEL			81 Name			
4081 N FEDERAL HWY #10 POMPANO BEACH FL 33064			-	82 Street Ac	Address (P.O. Box Number is Not Acceptable)		
,				83			
Ž 1				B4 City		FL 85 Zip Code	
office or re agent. I a	to the provisions of Sections 607,050? egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was	authorized	by the corpor	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of changing its registered of the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered ager	it and title if applicable. (NO	TE Rogistered	Agent signature re	quired when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PD	☐ DELETE	1.110	LF		Change Addition	
NAME	TERRANA, MICHEL		1.2 NA	ME			
STREET ADDRESS	1509 NE TERRACE		1.3 \$10	REE1 ADDRESS	,		
CITY-ST-ZIP	FT LAUDERDALE FL 33304			Y · \$1 - ZIP	. ,		
TITLE	SD SIGNAL COLUMN	☐ DELFTE	2.1 Til	1		Change Addition	
NAME	TERRANA, GIOVANNA		2.2 NA	1			
STREET ADDRESS	1509 NE TERRACE			REET ADDRESS			
ÇITY-ST-ZIP	FT LAUDERDALE FL 33304	DELETE	-	IY-ST-ZIP		Change Addition	
TITLE		ריין מנונוג	3.1 111			Citalige C Addition	
NAME			3.2 NA				
STREET ADDRESS				REE1 ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CI 4.1 TH	IY-S1-ZIP	<del></del>	Change Addition	
NAME			4. 2 N/				
STREET ADDRESS				REET ADDRESS			
				Y-ST-ZIP			
CITY-ST-ZIP TITLE		DELETE	5.1 TH			Change Addition	
NAME			5.2 NA				
STREET ADDRESS				REF1 ADDRESS			
11.				Y-S1-ZIP			
CITY-ST-ZIP		DELETE	61711			☐ Change ☐ Addition	

6.2 NAME 6.3 STREET ADDRESS

14. 4do 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 charged or on an attachment with an address.

**FILED** 

Apr 21 1997 8:00am

Secretary of State