

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northum
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 FEB 27 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000008131 (3)

1. Corporation Name

RESCOM CONSTRUCTION CORPORATION

Principal Place of Business

**8550 W FLAGLER ST
STE 116
MIAMI FL 33144**

Mailing Address

**8550 W FLAGLER ST
STE 116
MIAMI FL 33144**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/27/1993

3a. Date of Last Report
1/18/1994

4. FEI Number
65-0432625

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. The corporation has liability for intangible tax under S. 199.012,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUIZ, HUMBERTO E

10753 SW 104 ST 8550 W. FLAGLER STREET Ste 116

MIAMI FL 33176 MIAMI FL 33144

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 fee if applicable

Signature, typed or printed name of registered agent and fee if applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	RUIZ, ROBERTO N
STREET ADDRESS	8550 W FLAGLER ST #116
CITY - ST - ZIP	MIAMI FL 33144
TITLE	D
NAME	RUIZ, ROBERT J
STREET ADDRESS	8550 W FLAGLER ST #116
CITY - ST - ZIP	MIAMI FL 33144
TITLE	D
NAME	RUIZ, HUMBERTO E
STREET ADDRESS	10753 SW 104 ST
CITY - ST - ZIP	MIAMI FL 33176
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	RUIZ HUMBERTO E
3.3 STREET ADDRESS	8550 W FLAGLER STREET Ste 116
3.4 CITY - ST - ZIP	MIAMI, FLA 33144
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and I do not qualify for the exemption stated in Sections 131.07, 131.071, 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 record or trustee empowered to execute this report as required by Chapter 131, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/95

(304) 252-2277