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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P9400004459 (1)

BUILDING UP, INC.

1. Corporation Name



Principal Place o	T BUSINESS	rviçti	ling Address								
407 LINCOLN RD SUITE 5B MIAMH BEACH FL 33139 US		407 LINCOLN RD SUITE 5B MIAMI BEACH FL 33139 US			3.	Date incorporated or Qualified 01/19/1994	<b>3a</b> . Date <b>05</b>	of Last Re <b>/01/199</b>			
O Dringing Place	on of Rusinose	28	Mailing Address				4.	FEI Number	_L	A	pplied for
. Principal Place of Business			26				65-0460740 Not Appli				lot Applicable
1 Suite, Apt. #, etc 2			Suite, Apt #, etc				5.	Certificate of Status Desired	S8.75 Additional Fee Required		
City & State			City & State					Election Campaign Financing Trust Fund Contribution	\$5.00 M		•
Zip	Country 25		Zipi	Countr 30	ry		8.	This corporation has liability for Florida Statutes   X Yes	intangible ta: □No	under s	199.032,
4	9. Name and Address of Currer		ered Agent				10	Name and Address of New F	legistered A	gent	
				81	1	Name					
BRITO, L					2	Street Addr	treet Address (P.O. Box Number is Not Acceptable)				
407 LINCOLN RD SUITE 5B MIAMI BEACH FL 33139				8:	3						
				84	4	City			FL	85 Zu	Code
12.	ografine typed or perfect one of control og o		10RS	13.		Sgott a robbine	d whee	and the Additions/Changes to OFF		DIRECTO	PRS IN 12
TITLE	DP		☐ DELETE	1 1 1/11					L	] Change	
NAME	URTUBIA, AURELIO % 407 LINCOLN RD, SUITE	KR.		1.2 NAM 1.3 STRE		innares					
STREET ADDRESS	MIAMI BEACH FL	<i>5</i> 0		1.4 CITY		1					
CITY - ST - ZIP TITLE	VST		[ ] DELETE	2 1 TH					C	] Change	Addition
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STREET ADDRESS	% 407 LINCOLN RD, SUITE	58		2.3 \$146	EFT A	ADDRESS					
CITY - ST- ZIP	MIAMI BEACH FL			2.4 CiTY		-7P			·	] Change	Addition
TITLE			DELETE	3 1 THL					·		C) Addition
NAME				3.2 NAM		ADDRESS					
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NAME				5.2 NAV		ADDRESS					
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NAME				6.2 NAN							
STREET ADDRESS				€35[H	eet.	ADDRESS					
City-S1-ZP				€ 4 € 1	y SI	T - Z-P					

14. If do hereby certify that the information subjective this is hing 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 of this agricultural proof or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the Large poration or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if yilling the containing the statement with an address

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96

(305)865-8205

Dayting Stone #