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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

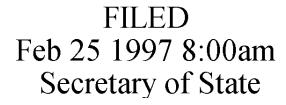
1997

DOCUMENT # P95000010911 (2)

COMMERCIAL BUILDING MATERIAL, CORP.

| Principa | ai Plac | e of | Bus | F) |
|----------|---------|------|-----|----|
| 1780 W | 4191 | £T | AR. | |

Mailing Address





| HALEAH FL 33012 | | 1760 W. 41ST ST. #B HIALEAH FL 33012-7017 | | | |
|-----------------|--|--|----------------------------|--|---|
| | | | | 3. Date Incorporated or Qualified 02/06/1995 | 3a. Date of Last Report 02/08/1996 |
| 2. Principal P | tace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | | 26 | | 65-0564089 | Not Applicable |
| Suite, Apl | #, etc. | Suite, Apt #, etc | | | 60 7E |
| 22 | | 27 | • | 5. Certificate of Status Desired | Fee Required |
| City & State | 3 | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 | | Trust Fund Contribution | Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation has liability for | *************************************** |
| 24 | 25 | 29 | 30 | Florida Statutes | Kyes □ No |
| | | f Current Registered Agent | | 10. Name and Address of New Re | gistered Agent |
| | iveran, Nelson | | 81 Name | | |
| 1760 |) W. 41\$T ST. #B | | 82 Street | Address (P.O. Box Number is Not Acceptate | Jak |
| HIAL | EAH FL 33012 | | 30000 | Address (F.O. Box Number is Not Acceptat | ne, |
| | • | | 83 | | |
| | • | | 84 City | | |
| | _ | | B4 City | • | FL 85 Zip Code |
| 11. Pursuant | to the provisions of Sections | 607.0502 and 607.1508, Florida Statute | s, the above-named | corporation submits this statement for the p | purpose of changing its registered |
| Diffice of r | edistered agent, or both, in ti | he State of Florida. Such change was at he obligations of, Section 607.0505, Flor | ithorized by the corr | poration's board of directors. I hereby accept | ot the appointment as registered |
| SIGNATURE | | | | • | |
| SIGNATURE | Stgred nei typed or poilted name of reg | istered agent and title it applicable. (NOTE: | Registered Agent signature | required when reinstating) | DATE |
| 12. | | ERS AND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFIC | |
| TITLE | DPS | DELETE | 1.1 TITLE | | Change Addition |
| NAME | GRAVERAN, NELSON | | 1.2 NAME | | |
| STREET ADDRESS | 1760 W. 41ST ST. #B | | 1.3 STREET ADDRESS | | |
| CITY - ST - ZIP | HIALEAH FL 33012 | | 1.4 CITY-ST-ZIP | | |
| TITLE | DT | ☐ DELETE | 2.1 TITLE | | Change Addition |
| NAME | GRAVERAN, ISABEL C | | 2.2 NAME | | |
| STREET ADDRESS | 1760 W. 41ST ST. #B | | 2.3 STREET ADDRESS | | |
| CITY-ST-7/P | HIALEAH FL | | 2.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | . 3.1 TITLE | | Change Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADORESS | | • |
| CITY - S1 - ZIP | PT-ST-00-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | | 3.4. CITY-ST-ZIP | | |
| FITLE | | ☐ DELETE | 4.1 TITLE | | Change Addition |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | |
| THELE | | DELETE | 5.1 TITLE | | Change Addition |
| NAME | | | 52 NAME | | e e |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | : | · |
| CITY-SI-712 | | | 54 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 61 TITLE | | Change Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 63 STREET ADDRESS | · | · |
| CITY-SE-ZiP | | | 64 CITY-ST-ZIP | | |

14. I do 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 peport is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or dustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name Lam an officer or director of the corpo appears in Block 12 or Block 13 if the