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PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

SIGNATURE:

CHY- ST- 7P



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000017718 (4)

V.C. CONSTRUCTION CORP.

Principal Place of Business Mailing Address 3000 S.W. 101ST COURT 3000 S.W. 101ST COURT MIAMI FL 33165-2935 MIAMI FL 33165 3. Date Incorporated or Qualified 3s. Date of Last Report 04/16/1996 03/03/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0581494 26 Not Applicable 21 Suite, Apt. #. etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired X Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, X Yes 🗌 No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name FILINGS, INC. 3732 N.W. 16TH STREET Street Address (P.O. Box Number is Not Acceptable) 82 FORT LAUDERDALE FL 33311 83 City 84 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 agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or printed name of registered agent, and little if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12 13. DELETE Change Addition 1.1 TITLE TITLE FERNANDEZ, VICTOR CR2E034 1.2 NAME NAME 3000 S.W. 101ST COURT 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33165** 1.4 CITY-ST-ZIP CITY - \$1 - 26 Change Addition DELETE 21 TITLE THEF CANALES, GABRIEL 22 NAME NAME 3000 S.W. 101ST COURT STREET ADDRESS 23 STREET ADDRESS **MIAM! FL 33165** 2.4 CITY - ST-ZIP QITY - 51 - Zir DELETE Change Addition THE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CIY-ST-ZiP DELETE Change Addition 4.1 TITLE TRUE NAM 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY ST-ZIP DELETE Change Addition 5.1 TITLE 1011 5.2 NAME NAME 53 STREET ADDRESS STREET ADDRESS 5 4 CITY-ST-ZIP CITY - \$1 - ZiF DELETE Change Addition 6.1 TITLE Title 6.2 NAME NAME

6.3 STREET ADDRESS

TVictor Fernandez, Pres

6.4 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED May 02 1997 8:00am Secretary of State

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