

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

**FILED**

**Apr 22 1997 8:00am  
Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



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

**DOCUMENT # P95000028296 (8)**  
1. Corporation Name

**Miami Ferry Contractors, Inc.**

Principal Place of Business Mailing Address

2. Principal Place of Business		2a. Mailing Address	
21	5002 N.W. 36th Street Suite, Apt. #, etc.	26	P.O. Box 520782 Suite, Apt. #, etc.
22	City & State	27	City & State
23	Miami, Florida	28	Miami, Florida
24	Zip Country	29	Zip Country
33152	U.S.A.	33152	U.S.A.

3. Date Incorporated or Qualified	3a. Date of Last Report
04/10/1995	4/23/1996
4. FEI Number	Applied For
65-0635231	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**Filings, INC.  
3732 N.W. 16th Street  
Fort Lauderdale, Fl. 33311**

10. Name and Address of New Registered Agent	
01 Name	
02 Street Address (P.O. Box Number is Not Acceptable)	
03	
04 City	FL
05 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	Scott, Steven
STREET ADDRESS	3831 N.W. 60th Court
CITY-ST-ZIP	Virginia Gardens, FL 33166
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	Berry, Frank
STREET ADDRESS	3831 N.W. 60th Court
CITY-ST-ZIP	Virginia Gardens, FL 33166
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	PC <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Vito La Forgia
13 STREET ADDRESS	5002 N.W. 36th Street
14 CITY-ST-ZIP	Miami, FL 33152
21 TITLE	S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	Saul J. Sack
23 STREET ADDRESS	5002 N.W. 36th Street
24 CITY-ST-ZIP	Miami, FL 33152
31 TITLE	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	Anthony La Forgia
33 STREET ADDRESS	5002 N.W. 36th Street
34 CITY-ST-ZIP	Miami, Florida 33152
41 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	Vincent La Forgia
43 STREET ADDRESS	5002 NW 36th Street
44 CITY-ST-ZIP	Miami, FL 33152
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	
62 NAME	500002152445
63 STREET ADDRESS	-04/23/97--01091--049
64 CITY-ST-ZIP	***165.00

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 created, or on an attachment with an address.

SIGNATURE: *Saul J. Sack* **Saul J. Sack, Sec'y.** 4/16/97 (305) 871-5857

CR2E034 (9/96)