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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Saridra B. Mortham
Scoretary of State
DIVISION OF CORPORATIONS

1996 DOCUMENT #

P95000029129 (0)

TILT-TECH CONSTRUCTION CORPORATION

TILT-TECH CONSTRUCTION CONFORMION					
Principal Piace	e of Business	Mailing Address			
001-BRICKELL-KEY DRIVE OUITE-005- MIAM FL-33131		601 Brickell Key Di Outte 805+ Miami Fl 33131+	RIVE		Y
				3. Date Incorporated or Qualified 04/13/1995	3a. Date of Last Report  Initial Filing
2. Principal Pla	lace of Business	2a. Mailing Address	**************************************	4. FEI Number	Applied For
21 1321	SW 107 Ave #209A	26 6619 S. Dix	ie Hwy #154	65-0572306	Not Applicable
Surte, Apt. 22 2	#, etc. 209A	Suite, Apt. #, etc. 27 #154		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State 23 Mil ami	i, F1.	City & State 28 Miami, F	1.	Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees
Zip 24 33174	Country Dade	<sup>Ζφ</sup> 33143	Country 30 Dade	8. This corporation has liability for in Florida Statutes Yes	□No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	egistered Agent
			81 Name Ro	dolfo Villanueva	
			6401	ddress (P.O. Box Number is Not Acceptable Castaneda Street	9)
			83 84 City		DE Tin Code
			Cora	1 Gables, F1.	FL 85 33146
11. Pursuan 1 or regifter familiar wit SIGNATURE	Modera Julia	mueru	s, the above-named corp d by the corporation's b t: Registered Agent signature req	oard of directors. I hereby accept the appo	oose of changing its registered office intrinent as registered agent. I am  6-/0-96  DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE -		☐ DELETE	1. 1 TITLE	President	Change 🙀 Addition
NAME			1,2 NAME	Rodolfo Villanueva	
STREET ADDRESS			1.3 STREET ADDRESS	6401 Castaneda St Coral Gables, F1. 331	146
CITY-S1-ZIP TITLE		DELETE	1.4 CITY-ST-ZiP 2. 1 TTLE	Secretary	Change 😿 Addition
NAME		tall state	2.2 NAME	Maritza Villanueva	L onlings K tooms.
STREET ADDRESS			2.3 STREET ADDRESS	6401 Castaneda St.	
CITY - ST - ZIP			2.4 CHY-ST-ZIP	Coral Gables, F1. 331	146
TITLE		DELETE	3. 1 T/TLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3. STREET ADDRESS		
CITY - ST - ZIP		[7] DECETE	3.4 CITY-ST-ZIP		Change Addition
TITLE		L'I peccit	4. 1 T/TLE		[_] change [_] Abdition
NAME STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		
CITY-\$1-ZIP					ed to the
TITLE	**************************************		■ 4.4 CHTY ST-7/P 1	<u>നിനിന്നാൻ നന</u>	
NAME	1	DELETE	4.4 CHY+ST-ZIP 5. 1 T-TLE		2_nb Change  Addition
		[] DELETE			33031 Change Addition
STREET ADDRESS		[] DELETE	5. 1 T-TLE	-05/22/96010: ***225.00	33—-ŋḡ] Cliange □ Addition
STREET ADDRESS CITY-ST-7IP TILE		□ DELETE	5. 1 T-TLE 5.2 NAME		331951 Cliange   Addition

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes if 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 mide 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 3 if changed or on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TO SED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-10-96 306-228-16/1

CR2F034 (12/95