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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000033162 (5)

SANTA CLARA CONSTRUCTION COMPANY, INC.

## **FILED** Apr 24 1997 8:00am Secretary of State



Principal Place of Business		Mailing Addres	s		-				
SO10 COLLINS AVENUE MIAMI BEACH FL 33140		3010 COLLINS AVENUE MIAMI BEACH FL 33140-4107							
marani oznori						3. Date Incorporated or Qualific 04/27/1995		ite of Last f 29/1996	Report
2. Principal P	Place of Business	2a. Mailing Add	2a. Mailing Address 26			4. FEI Number 65-0583965	· · · · · · · · · · · · · · · · · · ·	Applied For Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #	, elc.			5. Certificate of Status Desired			Additional lequired
City & Stat		City & State				Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	F	Country	/	8. This corporation has liability			s. 199.032,
24	25 g. Name and Address of Cu	29	30	1		Florida Statutes  10. Name and Address of New	Yes [		
001		ment Registered Agent		81	Name	10. Name and Address of New	Hegistered /	tgent	
	MACHTENBERG, LEE C			"	T NEATTHE.				
	3 Sunset Drive Te 201			82	Street Ad	ldress (P.O. Box Number is Not Accep	table)		
	MI FL 33143			83					·
-				84	City		FL	<b>85</b> Zip	Code
11 Pursuant	to the provisions of Sections 607	'.0502 and 607 1508. Flor	ida Statutes, th	e abov	e-named co	orporation submits this statement for th		changing	its registered
office or r	registered agent, or both, in the S am familiar with, and accept the o	State of Florida, Such cha-	nga was author	rizad h	athe corpor	ration's board of directors, I hereby ac	cept the app	ointment as	s registered
SIGNATURE	Signature, typed or printed name of registers					guired which reinstating)	DATE		
12.		AND DIRECTORS		13.	ant ingredia a rec	ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12
TITLE	D		ELETE 1	.1 TITLE				Change	Addition
NAME	MOURA, GIL		1	I.2 NAME					
STREET ADDRESS	3010 COLLINS AVENUE		<b>I</b> 1	I.3 STREE	ADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33140		] ,	1.4 CHY-5	ST - ZIP				
TITLE			ELETE 2	2.1 THTLE			T 11	Change	Addition
NAME			2	2.2 NAME	,				
STREET ADDRESS	1		1 2	2.3 STREE	ADDRESS				
CITY-ST-ZIP			2	4 CHY-	S1 - ZIP				
TITLE			ELETE 3	3.1 TITLE				Change	Addition
NAME	}		<b>[</b> 3	1.2 NAME					
STREET ADDRESS			3	3.3 STREE	ADDRESS		-		
CITY-ST-ZIP		······································		3.4. CHY-	SI-ZIP				
TITLE			ELETE	1.1 TITLE				Change	Addition
NAME			4	. 2 NAME					
STREET ADDRESS			<b>]</b> 4	I.3 STREET	ADDRESS				
CITY-ST-ZIP				1.4 CITY - 5	31-ZIP	· · · · · · · · · · · · · · · · · · ·		<del></del>	
TITLE			ELETE 5	i.1 TITLE				Change	Addition
NAME			1 :	2 NAME					
STREET ADDRESS			: 5	.3 STREET	ADDRESS				
CITY-ST-ZIP				.4 CHY - 9	51 · 2(P				
TITLE			ELETE 6	i.1 T(TL€				Change	Addition
'NAME			<b>[</b> 8	3.2 NAME					
STREET ADDRESS				3 STREET	ADDRESS				
CITY-ST-ZIP	<u></u>			.4 CITY - S	31 - ZIP				
		1 1 10 10 1 10 10 1	117						

I do hereby certify that the information supplied with this filling 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 supplied annual report is frue and accurate and that my signature shall have the same logal effect as if made under oath, that I am an officer or director of the corporation or tipe receiver or floster emblwered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, occurring my annual manual appears in Block 12 or Block 13 if changed, occurring the same logal effect as if made under oath, that

04 10, 97 (305) 538-4100