

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000046760 (1)**

1. Corporation Name  
**ARC CONSTRUCTION INC.**



Principal Place of Business: **540 BRICKELL KEY DRIVE SUITE 521 MIAMI FL 33131**  
Mailing Address: **540 BRICKELL KEY DRIVE SUITE 521 MIAMI FL 33131**

3. Date Incorporated or Qualified: **06/12/1995**  
3a. Date of Last Report: **N/A**  
4. FEI Number: **65-0457485**  
Applied For Not Applicable  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes:  Yes  No

2. Principal Place of Business  
21 **360 MINORCA AVENUE**  
Suite, Apt. #, etc.  
22  
City & State  
23 **CORAL GABLES FL**  
Zip  
24 **33134** Country  
25 **USA**  
2a. Mailing Address  
26 **360 MINORCA AVE**  
Suite, Apt. #, etc.  
27  
City & State  
28 **CORAL GABLES FL**  
Zip  
29 **33134** Country  
30

9. Name and Address of Current Registered Agent

**CACCIAMANI, VICTORIA  
540 BRICKELL KEY DRIVE  
SUITE 521  
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name: **Jeannellia Perez**  
82 Street Address (P.O. Box Number is Not Acceptable): **360 MINORCA AVENUE**  
83  
84 City: **MIAMI Coral Gables FL** 85 Zip Code: **33134**

11. Pursuant to the provisions of Sections 607.0602 and 607.1502, 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 reporting on the status of the corporation under Florida Statutes.

SIGNATURE: *[Signature]* Jeannellia Perez DATE: **6/19/96**

OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
P	DAVILA, FERNANDO	540 BRICKELL KEY DRIVE	MIAMI FL 33131	<input checked="" type="checkbox"/>
VPS	DELEON, CARLOS	540 BRICKELL KEY DRIVE	MIAMI FL 33131	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	Change	Addition
PRESIDENT	FERNANDO DAVILA	360 MINORCA AVE	CORAL GABLES, FLORIDA 33134	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VICE-PRESIDENT	CARLOS DELEON	360 MINORCA AVE	CORAL GABLES, FLORIDA 33134	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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)(b), Florida Statutes. I further certify that the information indicated on this annual report or successor 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 officer or trustee authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on a separate sheet with an address.

SIGNATURE: *[Signature]* CARLOS E. DELEON DATE: **4/18/96** (305) 373-3047  
5/13/96 (305) 448-7288

CR2E034 (12/95)