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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State ... DIVISION OF CORPORATIONS

1996

P95000053170 (3) **DOCUMENT #** 

LAFARGE CENTRAL AMERICA INC.

Principal Place of Business Mailing Address

61 RUE DES BELLES FEUILLES

61 RUE DES BELLES FEUILLES



70110 FAIRS FRANÇE												
							-	3. Date Incorporated or Qualified	3a. Dat	e of Last F	Report	
2. Principal Pla	an of D. silvana		L 2a Mailing Address					07/11/1995 4. FEI Number			A - B - d F - u	
and the same of th		2a. Mailing Address								Applied For		
21 TRADE CENTER SOUTH Suite, Apt. #, etc.			26 TRADE CENTER SOUTH Suite Apt. #, etc.				65-0604177			Not Applicable		
221100 W.	, etc. Cypress Creek	Rd #85		ress	Cre	ekRo	1#85	5. Certificate of Status Desired			5 Additional Required	
City & State City & State							,, -	6. Election Campaign Financing \$5.00 May			00 May Be	
23 FT. LAUDERDALE, FL			28 FT. LAUDERDAUE, FL				Trust Fund Contribution LJ Added to Fe					
Zip	Country		Zip	···········	ountry			8. This corporation has liability for		ax under s	199.032,	
24 33309	25 BROWA		29 33309	30	BRC	WARD			s 🗌 No			
	9. Name and Address	s of Current	Registered Agent	·		r		10. Name and Address of New	Registered	Agent		
					81	Name	TERN	ANDO SANTOS				
CORPO	CORPORATION SERVICE COMPANY							ress (P.O. Box Number is Not Acceptable)				
1201 HAYS STREET TALLAHASSEE FL 32301					82 Street /			100 W. Cypress Creek Rd. #850				
					83	TRADE CENTER SOUTH						
•					84	City				85 Z	ip Code	
4								LAUDERDALE	FL	_    3	3309	
11. Pursuarit to	the provisions of Section	s 607 0502 a	nd 607,1508, Florida Statut	tes the a	hove.	named c	orporatio	on submits this statement for the port of directors. Thereby accept the ap	urpose of ch	anging its	registered office	
or registere a familiar with	on agent, or both, in the fa h, and accept the obligate	tate or Florida ons o , Sectio	i. Such change was authoriz n 607.0505, Florida Statut <b>e</b> s	zeciby th S.	e corr	oration s	poaro c	or directors. I hereby accept the ap	pontment a:	s registere	o agent. I am	
SIGNATURE: .		min						may 2.	1996			
SIGNATURE	Styrenare, typed or printed name of	registered gront a	d tite it applicable. (NK	OTE: Propieto	red Age	nt signature i	ocuired wh	nen recistating)	ÇATE			
12.	Of	FICERS AND	DIRECTORS	1:	3.			ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECT	ORS IN 12	
TITLE	D		DELE TE	1.	1 TITLE					D Change	Addition	
NAME	LIDENA, GILBERT			1.3	NAME							
STREET ADDRESS	22 AVENUE DE L	A CELLE SA	UNT-CLOUD	1.3	STREE	T ADDRESS						
CITY-ST-ZIP	92420 VAUCRESS				4 O!TY-:							
TITLE	D	MITTIMIT	[ ] DELETE		1 TITLE	DI EI	D			Change	☐ Addition	
NAME	•	100	<u></u>	I -	NAME			ntos, Fernando		<b>(43)</b> 0.10 (8)	hand . Assets	
	SANTOS, FERNAN						Poic	it of Americas T - Ar	t 11012			
STREET ADDRESS	61 RUE JEANM R					T ADDRESS	210	o south arean take	יישן יוי			
CITY-ST-ZiP	75116 PARIS FRA	NCE	E3 or cv		1СПҮ-		154.1	nt of Americas I - Ar o South Grean Lane auderable, FL 333	<u> </u>		Pol Alice	
TITLE			DELETE		1 TITLE		ĺ	·		Change	Addition	
NAME				3:	2 NAME							
STREET ADDRESS				3:	3 STREE	T ADDRESS						
CITY-ST-7IP				3 -	CITY-	ST-ZIP	ļ					
TilLE			DELETE	4.	1 TITLE					☐ Change	Addition Addition	
NAME				4.;	2 NAME							
STREET ADORESS				4:	3 STREF	T ADDRESS						
CITY-ST-ZIP					4 CHY-							
TITLE			DELETE	*****	1 TITLE			فريبون فاد فيبره فيبره فيبأه فردرة فليبا		Change	Addition	
NAME				1	2 NAME			80000 <b>18</b> -05/23/9601		<b>30</b>	<del></del>	
STREET ADDRESS						T.ADORESS		_U3/_Z3/_3b**_U1	0100	(C)		
								***200.00			١,	
CITY-S1-ZIP			□ DELETE		4 CITY-	51-2IF	<del> </del>			Change	Addition A	
TITLE			בן אנונונ		1 TITLE					T Amanda	LI YOUROIL	
NAME					2 NAME					:	062 >	
STREET ADDRESS				6.	3 STREE	T ADDRESS					<b>X'</b> り	
CITY - ST - ZIP		*********			4 CITY -		<u> </u>					
14. I do hereb	y certify that the information	on supplied w	th this filing is voluntarily fun	nished ar	nd doi	es not qu	alify for t	the exemption stated in Section 11	9.07(3)(k), FI	orida Stati	utes. 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 office 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: BIGNATURE AND TYPEO ON PRINTED IN ME OF SIGNING OFFICER OR DIRECTOR

April 18, 1996.