

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

FILED

Apr 24 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000054126 (4)

1. Corporation Name

ABRIL BUILDERS CORP.



Principal Place of Business

90 WEST SUNRISE AVE
CORAL GABLES FL 33133

Mailing Address

2495 W 80 ST #5
HIALEAH FL 33016

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/13/1995

2. Principal Place of Business

21 10777 S.W. 60TH AVE.

Suite, Apt. #, etc.

22 City & State
MIAMI, FLORIDA

23 Zip Country
33156 DAE

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country
29 30

4. FEI Number

65-0638049

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ABRIL, EDUARDO L
90 WEST SUNRISE AVE
CORAL GABLES FL 33133

10. Name and Address of New Registered Agent

81 Name
ABRIL, EDUARDO L.

82 Street Address (P.O. Box Number is Not Acceptable)
10777 S.W. 60TH AVE

83 MIAMI, FLORIDA

84 City

FL

85 Zip Code
33156

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

04/16/98

12. OFFICERS AND DIRECTORS

TITLE D
NAME ABRIL, EDUARDO L
STREET ADDRESS 90 WEST SUNRISE AVE
CITY-ST-ZIP CORAL GABLES FL 33133

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 10777 S.W. 60TH AVE
1.4 CITY-ST-ZIP MIAMI, FL 33156

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 changed, or on an attachment with an address.

SIGNATURE:

Eduardo L. Abril

4/16/98 (305) 823-7859

CR2E034 (10/97)