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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # P95000058813

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90035 048 \*\*\*150.00

RELLO (	CONSTRUCTION, INC.								
Principal Place	e of Business	Mailing Address					3 (#B)(#B) (3B) (\$10) B)(6) BQ(1) BB)(6) BB(4)	01 <b>0</b> (101 10(0) 1010	I IT <b>rae</b> iini i <b>es</b> i
1729 N.W. 15T	1 STREET	1729 N.W. 15TH STREET							
MIAMI FL 33125	·	MIAMI FL 33125			İ	DO NOT WRITE IN TH	S SPACE		
						F	3. Date Incorporated or Qualifed		
	`					- [	07/31/1995		
2. Principal Place of Business 2a. Mailing Address							4. FEI Number	Ar	plied For
21		26					65-0606468	No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75	Additional
22		27					5. Certificate of Status Desired	Fee Re	equired
City & Stat	e	City & State					6. Election Campaign Financing		May Be
23		28					Trust Fund Contribution	Added	to Fees
Zip	Country	Zip ~~~~~		intry	-,	_ [	8. This corporation owes the current year		
24	25[	[29]	30	1			Personal Property Tax.	Yes	□No
	9. Name and Address of Curren	t Registered Agent		04	Nema		10. Name and Address of New Registere	a Agent	
DCI I	lo, luis			81	Name		. <u></u>		
	) N.W. 15TH STREET		82 Street Add			Address	s (P.O. Box Number is Not Acceptable)		
	MI FL 33125			0.2	<del></del>				<u></u>
·	WI I L 33123			83					
	•			84	City		F	85 Zip	Code
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was	authorized	1 hv 1	ine como	corpora ration's	ation submits this statement for the purpose is board of directors. I hereby accept the app	of changing its	registered egistered
SIGNATURE	Signature, typed or printed name of registered agei	nt and title if applicable. (NO	TE: Registered	Agent	signature rec	quired wt	then reinstating) DATE		
12.		ID DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12
TITLE	D DELETE			1.1 TITLE				☐ Change	Addition
NAME	BELLO, LUIS		1.2 N	AME					
STREET ADDRESS	1729 N.W. 15TH STREET		1.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33125		1 <u>4</u> C	TY-ST	-ZIP				
TITLE	D DELETE			2.1 TITLE				☐ Change	☐ Addition
NAME	BELLO, JULIO		2.2 NA						
STREET ADORESS	1729 N.W. 15TH STREET		2.3 \$		ADDRESS				
CITY-ST-ZIP	MIAMI FL 33125		2.40	:ПY-\$	T-ZIP		<u> </u>		
TITLE		☐ DELETE	3.1 Ti	TLE	1			☐ Change	Addition
NAME	,		3.2 N	AME					
STREET ADDRESS		and the second second	3.3 S	REET	ADDRESS	~- <i>-</i> -	- 1 m	•	- '
CITY-ST-ZIP			_	:πy-s	T-ZIP			C Charre	- Addition
TITLE	`	☐ DELETE	4.1 T	ΠE				Change	Addition
NAME	•		4.21	IAME	ı				
STREET ADDRESS	·		4.3 S	TREET	ADORESS				1
CITY-ST-ZIP				TY-ST	-ZIP				[ Addition
TITLE		☐ DELETE	5.1 T					Change	Addition
NAME	,		5.2 N						l
STREET ADDRESS					ADORESS				}
CITY-ST-ZIP	<u> </u>	<u></u>	5.4 C 6.1 T	TY-ST	-ZIP			☐ Change	Addition
TITLE		☐ DELETE						□ coange	☐ Yourion
NAME	.,		6.2 N		ADDOCCO				
STREET ADDRESS			- 1		ADDRESS				
CITY-ST-ZIP	1		6.4 C	ITY-SI	-ZIP				

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 one attachment with an address, with all other like empowered.

SIGNATURE: