

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000070150 (4)**

IN LINE CONSTRUCTION CORPORATION



Principal Place of Business

Mailing Address

7464 S.W. 21ST ST.
MIAMI FL 33155

7464 S.W. 21ST ST.
MIAMI FL 33155

2. Principal Place of Business

2a. Mailing Address

21. State: FL
22. City: MIAMI

23. Zip: 33155
24. Country: USA

25. County: DADE

26. State: FL
27. City: MIAMI

28. Zip: 33155
29. Country: USA

30. County: DADE

9. Name and Address of Current Registered Agent

ANGULO, VICTOR AUSTIN
7464 S.W. 21ST ST.
MIAMI FL 33155

3. Date Incorporated or Qualified

09/08/1995

3a. Date of Last Report

4. Filing Number

65-0600420

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. 190.032,
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Applicable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.06 and 607.07, 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. Thereby, accept the appointment as registered agent. I am hereby accepting the appointment. See Section 607.06, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. NAME: **D**

ANGULO, VICTOR A
7464 S.W. 21ST ST.
MIAMI FL 33155

2. NAME: ☐ DELETE

3. NAME: ☐ DELETE

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30. NAME: ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY, ST, ZIP

☐ Change ☐ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-17-96

CR2E034 (12/95)