SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # P95000073928 (0)

1. Corporation Name

D. S. E. CONSTRUCTION INC.,

Principal Place of Business
7524 N.W. 8th Street
Miami, FL 33126

Mailing Address
P.O. Box 77-1354
Coral Springs, FL
33077

3. Date Incorporated or Qualified: 09/25/1995
3a. Date of Last Report: N/A
4. FEI Number: 65-060-8966 — Applied For / [X] 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 Same as above
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 Same as above
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

Lynn Riley
300 Madeira Ave., No. 101
Coral Gables, FL 33134

10. Name and Address of New Registered Agent
81 Name: David Childers
82 Street Address (P.O. Box Number is Not Acceptable): 7524 N.W. 8th Street
83
84 City: Miami FL 85 Zip Code: 33126

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 X [signature] DATE 13 June 96
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PS	[ ] DELETE
NAME	CHILDERS, DAVID	
STREET ADDRESS	300 MADEIRA AVENUE #101	
CITY-ST-ZIP	CORAL GABLES FL 33134-4259	
TITLE	V	[ ] DELETE
NAME	CABRERA, RICARDO	
STREET ADDRESS	12700 BIRD ROAD	
CITY-ST-ZIP	MIAMI FL 33175	
TITLE	V	[X] DELETE
NAME	Jose L'Taif	
STREET ADDRESS	7900 S.W. 37th Street	
CITY-ST-ZIP	Miami, FL	
TITLE	T	[ ] DELETE
NAME	RILEY, LYNN	
STREET ADDRESS	300 MADEIRA AVENUE #101	
CITY-ST-ZIP	CORAL GABLES FL 33134-4259	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
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		
1.4 CITY-ST-ZIP		
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		

CR2E034 (3/96)

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)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X [signature] — 18 June 96 — 1800 413 1905 / 305-265-8313
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — David Childers
Date — Daytime Phone #