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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000076503 (8)

Principal Place of Business	Mailing Address		
10612 S.W. 184TH TER.	10612 S.W. 184TH TER.		
MIAM) FL 33157	MIAMI FL 33157		

## **FILED** Feb 24 1998 8:00am Secretary of State

A & B IRRIGATION DESIGN AND I	MANAGEMENT, INC.			
Principal Place of Business Mailing Address			- T HORIVAEN FILE IBLEF DINTH BURIN DENN DONN BUNN IUN	III DIIDI DIIII DDIBL IIII IGEI
10612 S.W. 184TH TER. 10612 S.W. 184TH TER.				
MIAM! FL 33157 MIAM! FL 33157		DO NOT WRITE IN THIS SPACE		
			3. Date Incorporated or Qualified	OFACE
			10/05/1995	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0611932	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27			Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	28 Zip	Country	8. This corporation owes or has paid the cu	
24 25	- ·	30	· ·	Yes No
9. Name and Address of Curren			10. Name and Address of New Registered	Agent
ALEMAN, DIANA		81 Name	EMAL DIALA	
8006 S.W. 149TH AVENUE		82 Street And	ress (P.O. Box Namber Is Not Acceptable)	
#D402		182	SZZ NW 65 AVE	
MIAMI FL 33193		83 20	<b>ア                                    </b>	
		84 City		85 7000
$\Lambda$	and the state of t		IAM FI	
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both in the State agent. I am familiar 17th, and act 201 trie golden.	i2 and 607.1508, Florida Statute of Florida. Such change was a	es, the above-named corp authorized by the corporal	poration submits this statement for the purpose i tion's board of directors. I hereby accept the ap	pointment as registered
agent I am familiar Wh, and ad Abt the dolligi	ations of, Section 607.0505, Flo	orida Statutes.	· , · ·	-
SIGNATURE	NOTE (NOTE	Registered Agent signature requir	red when reinstating) DATE	
12. OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE PVTD	DELETE	1.1 TITLE	VID I SILL	Change Addition
NAME ALEMAN, DIANA		1.2 NAME	1822 NW 68 AVE#	<b>.</b>
STREET ADDRESS 18125 N.W. 83RD AVE.		1.3 STREET ADDRESS	3522 NW 66 MICH	-
CITY-ST-ZIP MIAMI FL 33015		1.4 CITY-ST-ZIP	MAMI, PL 33015	
TITLE	☐ DELETE	21 TITLE	•	Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	2. 4 C/TY - ST - Z/P 3.1 T/TLE		Change Addition
TITLE NAME	בַ טנננונ	3.1 TILE 3.2 NAME		C Annual C Longition
STREET ADDRESS		3.3 STREET ADDRESS		
' CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP	——————————————————————————————————————	5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME	Λ	6.2 NAME	4	
STREET ADDRESS	<u>, /</u>	6.3 STREET ADDRESS		İ
CITY-ST-ZIP  14. I hereby certify that the information supplied w	ith this filling does not qualify to	r the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further of	ertify that the information

indicated on this annual report or supplemental annual officer or director of the corporation of the receiver or Block 12 or Block 13 if changed, or on an attachment of the corporation of the receiver or block 12 or Block 13 if changed, or on an attachment of the corporation of struc and accurate and that my signature shall have the same legal effect as if made under oath; that I am an appowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in