

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

FILED

Mar 26 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000080325 (0)
1. Corporation Name
ALLIED CONSTRUCTORS GROUP, INC.



Principal Place of Business
2727 SOUTHWEST 22 AVENUE
COCONUT GROVE FL 33133

Mailing Address
POST OFFICE BOX 143077
CORAL GABLES FL 33114-3077

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 4141 NE 2nd AVE

2a. Mailing Address

Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 108

27 City & State

23 Miami, FL

28 City & State

Zip

Country

Zip

Country

24 33137

25 USA

29

30

9. Name and Address of Current Registered Agent

GRILLO, MICHAEL
2727 SOUTHWEST 22 AVENUE
COCONUT GROVE FL 33133

3. Date Incorporated or Qualified

10/19/1995

4. FEI Number

65-0614635

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30.

☐ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME GRILLO, MICHAEL A
STREET ADDRESS 2727 SOUTHWEST 22 AVENUE
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE V ☐ DELETE

NAME SALLES, JAIME
STREET ADDRESS 2727 SOUTHWEST 22 AVENUE
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE S ☐ DELETE

NAME MICHAEL GRILLO
STREET ADDRESS 2727 SW 22 AVENUE
CITY-ST-ZIP COCONUT GROVE FL

TITLE T ☐ DELETE

NAME GRILLO, MICHAEL A
STREET ADDRESS 2727 SOUTHWEST 22 AVENUE
CITY-ST-ZIP COCONUT GROVE FL 33133

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 C.E.O.
1.3 STREET ADDRESS Grillo, Michael A
1.4 CITY-ST-ZIP 2727 S.W. 22 Ave
Coconut Grove, FL 33133

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 Secretary
3.3 STREET ADDRESS Grillo David
3.4 CITY-ST-ZIP 14625 S.W. 63 Terrace
Miami, FL 33183

4.1 TITLE ☒ Change ☒ Addition

4.2 NAME Treasury
4.3 STREET ADDRESS Grillo David
4.4 CITY-ST-ZIP 14625 S.W. 63 Terrace
Miami, FL 33183

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME President
5.3 STREET ADDRESS Shannon Crowell
5.4 CITY-ST-ZIP 9001 SW 122 AVE. Bilg. #1 Apt.308
Miami, FL 33186

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/98

Daytime Phone # 0260688

CR2E034 (10/97)