FILE NOW: FILING FEE AFTER MAY 1 it

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPAR

FILED

Jun 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600005454 (9)

ENGINEERING & CONSTRUCTION CORP.

Principal Place	e of Business	Mailing Address					
8180 N.W. 36TH ST. SUITE 430 MIAMI FL 33168		8180 N.W. 36TH ST. SUITE 430 MIAMI FL 33168-6686					
					3. Date Incorporated or Qualified 01/16/1996	3a. Date of Last Report	
2. Principal Place of Business 21		26. Mailing Address 26. 15061 9.W 42 TERRACE			4, FEI Number 65-0644371		Applied For Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State FLORIDA			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country DADE		8. This corporation has liability for in	nlangible tax und Yes \(\sum \) No	ler s. 199.032,
24	9. Name and Address of Current		שטריע ווו		Florida Statutes D. Name and Address of New Reg		· · · · · · · · · · · · · · · · · · ·
PEREZ, MAXIMO J			81 Name				
1500	81 S.W. 42TH TERRACE	82 Street Add		Address	ress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33185			83				
							7-0-1
			84 City				Zip Code
11, Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered office or registered aged, 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 way and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or printed name of registers agent	and title (applicable (NOTE:	Registered Agent signature	e required w	hen reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	PRESIDENT	☐ DELETE	1.1 1171.6		XIDEAT.	Char	nge 🔲 Addition
NAME	MAXIMO PEREZ		1.2 NAME		cimo poces	ı	
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NAME			5.2 NAME			_	,
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			54 CHY-ST-ZIP				
TITLE		DELETE	61 TITLE	1		Char	nge Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				f
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14. I do 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 roceiver 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 it changed by on an attachment with an address.							