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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000011960

1. Corporation Name

M.L.C. CONSTRUCTION CORPORATION

FILED Apr 05, 1999 8:00 am Secretary of State

04-05-1999 90013 012 ***150.00



Principal Place of Business Mailing Address								
5931 NORTH KENDALL DRIVE 5931 NORTH KENDALL DRIVE MIAMI FL 33156 MIAMI FL 33156						DO NOT WHITE IN THIS SPACE		
						DO NOT WRITE IN THIS SPACE		
						3. Date incorporated or Qualifed 02/07/1996		
Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For	_	
21 26						65-0639206 Not Applicable	4	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State	يك بالمنطق المستمين	City & State			بتوخة دوعطتشنين	6:= Election Campaign: Financing	ني يد	
23		28				Trust Fund Contribution Added to Fees	_	
Zip	Country	Zip Country				This corporation owes the current year Intangible		
24	25	29	30			Personal Property Tax. Yes No	4	
	9. Name and Address of Current	Registered Agent		4.1		10. Name and Address of New Registered Agent	-	
LOPEZ-CALLEJA, MARIO JR				81	Name '			
8651	SW 142 ST.			82	Street Addres	ss (P.O. Box Number is Not Acceptable)		
MAN	MI FL 33158			83			7	
				84	City	FL 85 Zip Code	1	
41 Descript to the provisions of Sections 607 0502 and 607 1509 Elocida Statutes, the above named composition submits this statement for the number 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 is	and title if applicable. (NOTE:	Registered	Agent	signature required w	when reinstating) OATE] ,	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_] {	
TITLE	PVPS	☐ DELETE	1.1 TITLE			☐ Change ☐ Additio	u 3	
NAME	MARIO LOPEZ-CALLEJA JR		1.2 NA	ME			;	
STREET ADDRESS	8651 SW 142 ST.		1.3 ST	REET #	ADDRESS		}	
CITY-ST-ZIP	MIAMI FL	1.4 Cl					_] 8	
TITLE		☐ DELETE	2.1 TIT			Change Addition	1 (
NAME			2.2 NAME		1			
STREET ADDRESS			2.3 ST	REET	ADDRESS			
CITY_ST-ZIP		_ , . ,	_ 2. 4 CF			<u> </u>	_]_	
TITLE			3.1 TIT			Change Additio	<u> </u>	
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 ST	REET A	ADDRESS			
CITY-ST-ZIP			3.4. CI		į.			
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NAME			4. 2 N	WE		·		
STREET ADDRESS			4.3 ST	REET A	ADDRESS			
CITY-ST-ZIP				Y-ST-			1	
TITLE		☐ DELETE	5.1 TIT			☐ Change ☐ Addition	a [
NAME			5.2 NA					
STREET ADDRESS		•	5.3 ST	REET A	NODRESS			
CITY-ST-ZIP			5.4 CIT	Y-\$T-	ZIP :			
TITLE	·	☐ DELETE	6.1 TIT			☐ Change ☐ Addition	<u>~</u>	
NAME		_	6.2 NA	ME		, –		
STREET ADDRESS					NODRESS			
		6.4 CIT			·			
CITY-ST-ZiP	1		1 3.7 311					

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 of templemental 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 received or trostee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an autoress, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR