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 # P96000020369 (0)

PUJOL CONSTRUCTION INC.

rincipal Place of Business	Mailing Address			
14970 S.W. 46TH TERRACE MIAMI FL 33175	14370 S.W. 46TH TERRACE MIAMI FL 33175			

FILED Mar 02 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						E TORRINDE TIO TOTAL DIVIN OUT IN ORTH CONTROL FOR SOME SOME THIS DIVING SOME FOR		
14370 S.W. 46TH TERRACE 14370 S.W. 46TH TERRACE								
MIAMI FL 33175 MIAMI FL 33175					DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified	
							03/05/1996	
2. Principal P	lace of Business	2a. M	lailing Address				4. FEI Number Applied For	
21		26					65-0647046 Not Applicable	
Suite, Apt.	#, etc.	S	uite, Apt. #, etc.				5 Cartificate of Status Desired S8.75 Additional	
22		27	· · · ·				Fee Required	
City & State	9	\vdash	ity & State				6. Election Campaign Financing \$5.00 May Be	
23	Country	28	in.	Co	unden.	,	Trust Fund Contribution Added to Fees	
Zip		Country Zip Cou		нику		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24	9. Name and Address of Curren	29 t Register	ed Agent	30	Τ		10. Name and Address of New Registered Agent	
Di	JOL, JOSE M		▼		81	Name		
14	370 S.W. 48TH TERRACE				82	Chinal Ad	Idress (P.O. Box Number is Not Acceptable)	
	AMI FL 33175				82	Stieet Aut	idless (F.O. Box Number is Not Acceptable)	
17111	ARII I E GOTTO				83			
					84	City	85 Zip Code	
							FL '	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.	1508, Florida Statu	tes, the a	boy	e-named co	proporation submits this statement for the purpose of changing its registered	
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	or Florida. ations of, S	ection 607.0505, F	autriorize Iorida Sta	u by tutes	ne corpor s.	ration's board of directors. I hereby accept the appointment as registered	
SIGNATURE								
	Signature, typed or printed name of registered age			·····	d Age	ent signature req	quired when reinstating) DATE	
12.	OFFICERS ANI	DIRECTO	DELETE	13.	T) E	· I	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
TITLE	PD PUJOL, JOSE M		C peccie	1.2 N				
NAME	14370 S.W. 46TH TERRACE			•		ADORESS	·	
STREET ADDRESS	MIAMI FL 33175					T-ZIP		
CITY-ST-ZIP TITLE	STD		DELETE	2.1 TI		11-211	☐ Change ☐ Addition	
NAME	LASTRE, MARIA F			2.2 N		ļ		
STREET ADDRESS	14370 S.W. 46TH TERRACE					ADDRESS		
CITY-ST-ZIP	MIAMI FL 33175			2.40	ITY-S	ST- Ž IP		
TITLE			☐ DELETE	3.1 TI			☐ Change ☐ Addition	
NAME				3.2 N	AME			
STREET ADDRESS				3.3 S	TREET	ADDRESS		
CITY-ST-ZIP				3.4. 0	ITY-S	ST-ZIP		
TITLE			DELETE	4.1 TI	TLE		Change Addition	
NAME				4. 2 N	IAME			
STREET ADDRESS				4.3 \$	TREET	ADDRESS		
CITY-ST-ZIP			Decem			T- ZIP	Change Addition	
TITLE			☐ DELETE	5.1 TI			☐ Change ☐ Addition	
NAME				5.2 N				
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP			☐ DELETE			T-ZIP	Change Addition	
TITLE			FT DETELE	6.1 TI			Onange Addition	
NAME				6.2 N		4000000		
STREET ADDRESS						ADDRESS T-7IP		
1 41 V C1 780								

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.