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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Mar 05 1997 8:00am

Secretary of State

96/6)

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000021951 (4)

YEYO CONSTRUCTION CORP.

Principal Place of Business Mailing Address 4931 S.W. 142NO PLACE 4931 S.W. 142ND PLACE MIAMI FL 33175 MIAMI FL 33175-5025 3. Date incorporated or Qualified 3a. Date of Last Report 03/11/1996 2. Principal Place of Business 4. FEI Number 2s. Mailing Address Applied For 65 -Not Applicable 26 Šuitė, ApL #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing **\$5.00** May Be 28 Trust Fund Contribution 23 Added to Fees Z_{10} Country $Z_{\rm DD}$ 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BARONIEL, AURELIO 4931 S.W. 142ND PLACE Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 83 84 City Zip Code 85 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) Signative Type Lor product came of registered agent and life Tappicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. SVD DELETE Change ___ Addition THUE 1 1 TITLE BARONIEL, ANGELA 1.2 NAME NAME % 4931 S.W. 142ND PLACE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CI32 - \$1 - 703 1.4 CITY - ST - ZIP PTD ___ DELETE Change Addition DILLE 2.1 TITLE **BARONIEL, AURELIO** NAME 22 NAME % 4931 S.W. 142ND PLACE STREET ADDRESS 2.3 STREET ADORESS MIAMI FL CITY - \$1 - ZF 2 4 CITY-ST-ZIP DELETE Change Addition 18:E 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHIV - 51 - 760 3.4. CITY-ST-ZIP DELETE Change Addition THUE 4.1 TITLE NAME 4 2 NAME STREET ACCRESS 4.3 STREET ADDRESS CHTY - ST - Zip 4.4 CITY-ST-ZIP DELETE Change Addition 101. F 5.1 TITLE 5.2 NAME PLANT STREET ADDRESS 5.3 STREET ADDRESS CHIV-SH-ZIO 5 4 CITY-ST-ZIP blat ___ DELETE 6.1 TITLE Change Addition 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST- 2IP CHY+51+702 14. I do hereby cell ly 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.

PED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTOR