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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000069139 (9)

C.A. CONSTRUCTION, ENT.CORP.

Principal Piace of Business	
20150 S.W. 160 STREET MIAMI FL 33187	

2. Principal Place of Business

Suite, Apit. #, etc.

City & State

21

23

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

20150 S.W. 160 STREET MIAMI FL 33187-1044

## FILED May 02 1997 8:00am Secretary of State

3.	Date Incorporated or Qualified	3a. Date of Last Report

first

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

08/20/1996

65-0722586

5. Certificate of Status Desired

6. Election Campaign Financing

3-3-1997

Date

305~256-8169

Daytime Phone #

Trust Fund Contribution

4. FEI Number

Zip	Country	Zip		Country		8. This corporation	n has liability for intangit	ble tax under s.	199.032,	Ī
24	25	29	[	30		Florida Statutes		No .		J
	9. Name and Address of Current	Registered Agent				10. Name and Add	iress of New Registers	d Agent		I
MOI	rales, ana c			81	Name					
201	50 S.W. 160 STREET			82	Street Add	ress (P.O. Box Number	r is Not Acceptable)			
MIA	MI FL 33187				0.,00,,100	, 010 (1 10 1 DON 110 11DO	, 10(1, 000pluo.u)			ļ
				83						
				84	City				Sada	ł
				54	City		F	L  85   Zip (	2006	1
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligat	f Florida. Such cha	nge was a	uthorized by	the corpora					
SIGNATURE								······································		ļ
10	Signaruro Typed or printed name of registered agent OFFICERS AND		(NOTE		uper erutançis îne	ired when reinstating)	DATE ANGES TO OFFICERS A		2 141 12	1~
12.	0 OFFICERS AND		DELETE	13.	<del></del>	AUDITIONS/CIT	INGES TO OFFICENS A	Change	. Addition	96/6)
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	MIAMI FL 33187									띦
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NAME				3.2 NAME	{			•		l
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CITY+S1+ZIP				3.4 CITY-	ST-7IP					ł
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STREET ADDRESS				4.3 STREET	ADDRESS					
CITY-ST-ZIP				4.4 CITY - 5	ST-ZIP					
TITLE			DELETE	5.1 TITL€				Change	Addition	1
NAME				5.2 NAME						1
STREET ADDRESS				5.3 STREET	ADDRESS					
CITY - S1 - ZIP				5.4 CITY-5	ST-ZIP					
TITLE			DELETE	6.1 TITLE				Change	Addition	}
NAME				6.2 NAME						1
STREET ADDIRESS				6.3 STREET	ADDRESS					ĺ
CHY-S1-7IP				6,4 CITY - S						
14. I do heret	by certify that the information supplied on indicated on this annual report or su	with this filing does	not qualify	y for the exe	mption state	d in Section 119.07(3)	i), Florida Statutes. I furt	ther certify that	the	]
Lonionall	on indicated on this annual report of su	ppiementai aminua)	an annouse	or allu acci	unate anu tra	n my signature sildirild	ve ure same legal sitsci ver 607. Florida Statutes	e and that my n	ae: Oalii, IIIal	1