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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600074006 (3)
RICAL CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

6400 BW 55 ST. MIAMI FL 33155 6400 SW 55 ST. MIAMI FL 33155-645

FILED Apr 29 1997 8:00am Secretary of State



MIAMI FL 33155 MIAMI FL	MIAMI FL 33155-6455							
					3. Date Incorporated or Qualified 09/06/1996	3a. Date	of Last Fi	teport
 	ng Address		 -		4. FEI Number	- 		oplied For
21 26					AA			ot Applicable
Suite, Apt. #, etc. Suite 22 27	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State City 23 28	& State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip Country Zip		Courit	ry		8. This corporation has liability for it	ntangible tax	under s	. 199.032,
24 25 29	· · · · · · · · · · · · · · · · · · ·	30	·			Yes 🔲 I		
g, Name and Address of Current Registered	Agent	8			10. Name and Address of New Reg	gistered Age	ent	
CALDERON, PEGGY			1 Namo	9				
6400 SW 55 ST. MIAMI FL 33155		8:	2 Stree	t Addres	s (P.O. Box Number is Not Acceptable	le)		
		-	_		و و و و و و و و و و و و و و و و و و و			
		8	3		•			
		8	4 City			FL [°]	35 Zip	Code
11. Pursuant to the provisions of Scotlons 607,0502 and 607,150 office or registered agent, or both, in the State of Florida, St.	08, Florida Statute ich change was at	s, the about	ve-name by the co	d corpor rporation	ation submits this statement for the probability acception of directors. I hereby acceptions	urpose of ch of the appoin	anging it	ts registered registered
agent. I am familiar with, and accept the obtigations of, Section SIGNATURE						DATE		
Signature typed or printed name of registered agent and title if applied 12. OF FICE RS AND DIRECTORS		13.	gent signatu	re required	when reinstating) ADDITIONS/CHANGES TO OFFIC		BECTO	20 INI 22
TITLE D	DELETE	1.1 TOLE		T	ADDITIONAL TO OTTIC		Change	Addition
	CALDERON, PEGGY 6400 SW 55 ST.		1.2 NAME 1.3 STREET ADDRESS				·	
								,
CITY-ST-ZIP MIAMI FL 33155	MIAMI FL 33155		1.4 CITY-ST-ZIP					Ì
TITLE	DELFTE		21 1ITLE				Change	Addition
NAME			2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS							•	
CITY-ST-ZIP			2. 4 C(1Y - S1 - Z(P					
TITLE	C DELETE						Change	Addition
NAME			3.2 NAME					}
STREET ADDRESS	SS		3.3 STREET ADDRESS					ţ
CITY-ST-ZIP			3.4. CITY - ST - ZIP					· — · — · — · — · — · — · — · — · — · —
TITLE	DELETE		4.1 TITLE			Ŀ	Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADORESS					
CITY-SI-2IP	DELETE		4.4 CITY-ST-ZIP				Change	Addition
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NAME CORECT ADDRESS	ADDRESS		5.2 NAME					
REET ADDRESS			5.3 STREFT ADDRESS 5.4 CRY-ST-ZIP					
CITY-SI-ZIP TITLE	DELETE	5.4 CHY-		 -		T	Change	Addition
NAME	pectit	6.2 NAME				L	, oriengo	
STREET ADDRESS			E1 ADDRESS					
CITY-ST-ZIP		6.4 CITY		'				
14. I do hereby certify that the information supplied with this filir	g does not qualify			stated in	Section 119.07(3)(i), Florida Statutes	s. I further ce	rtify 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 attainment with an address.

CICNIATURE.

(orlders)

4/22/97

42EU34 (9/96)