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 # P96000088094 (3)

SARDINAS CONSTRUCTION GROUP INC.

Principal	Place o	of B usin	0 88

Mailing Address

FILED Apr 25 1997 8:00am Secretary of State



8180 ROYAL PA MIAMI BEACH		3120 ROYAL PALM AVE. MIAMI BEACH FL 33140-3	938							
						te Incorporated or Qualif	ied 3a. D	Date of Last Ro	eport	
2, Principal Place of Business		2a. Mailing Address	2a. Mailing Address			Number		- Ap	plied For	
21		26			65	-0706469			t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				•	. [~	\$8.75		
22 City & State		27 City & State				rtificate of Status Desired		Fee Re	quired	
	9	— <u> </u>	├ ─			ction Campaign Financir	ig 🗆	\$5.00 Added t		
23 Zip	28 Country Zip Cou		1 Cour	ntry.		st Fund Contribution	land 11 to 11 to			
_ `	├ ─┐	 	Zip Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No				
24	9. Name and Address of Curre	29	30			ime and Address of Nev				
040		ant neglistered Agent		81 Name	10. 140	into dilo Addices oi Mo	i ilogistoro	Agont		
	DINAS, JORGE L			- Ivanic						
	ROYAL PALM AVE.			B2 Street	Address (P.O.	Box Number is Not Acce	eptable)			
MIAI	MI Be ach Fl 33140		-		P					
				83						
				B4 City		.,		85 Zip (Code	
							Fl	_		
11. Pursuant to the provisions of Soctions 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE										
· · · · · · · · · · · · · · · · · · ·	Signature, typed or printed name of registered a			Agent signature	required when rein		, DATE	in hinearan		
12.	OFFICERS A	ND DIRECTORS DELETE	13.		000	DITIONS/CHANGES TO C		Change	Addition	
TITLE		_ better	1.1 TIT		Fies	e Sardinas Royal Pall	΄. Λ	L., Change	Addition	
NAME			1.2 NA		30,9	and Pall	n Hue		ł	
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TITLE			2.1 TIT	LE	Vice -	President . Se	cretary	Change	Addition	
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CITY+ST-ZIP			6.4 CB	Y-\$1-7IP						
										

14. I do 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.