## **2004 FOR PROFIT CORPORATION**

## Apr 12, 2004 8:00 am Secretary of State **ANNUAL REPORT** 04-12-2004 90249 040 \*\*\*150.00 DOCUMENT # P96000089533 HURTADO CONSTRUCTION CORP. Principal Place of Business Mailing Address 54030661 11601 NE 11 PL. 11601 NE 11 PL. MIAMI, FL 33161 MIAMI, FL 33161 03152004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0759166 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required. 6. Name and Address of Current Registered Agent HURTADO, JUAN C DO NOT WRITE 11601 NE 11 PL. MIAMI, FL 33161 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PBS TITLE HURTADO, JUAN CARLOS NAME STREET ADDRESS 11601 NE 11 PL. CITY-ST-ZIP MIAMI, FL 33161 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. 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 report or supplemental report is true and accurate anothrat 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Juan Carlos Hurtado

03/29/2004 Date

(305) 371-4112

**FILED**