FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State

Mailing Address

DIVISION OF CORPORATIONS

DOCUMENT # P96000097874 (7)

C & S BUILDERS INC.

Principal Place of Business

1998

FILED Apr 13 1998 8:00am Secretary of State

11201 S.W. 60 AVE. 11201 S.W. 60 AVE. 11201 S.W 60TH AVE. MIAMI FL 33156 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/04/1996			
	ace of Business	2a. Mailing Address	0	Ω.	4. FEI Number		oplied For
21 \$5 44	8.W. YUR. STREET	26 S. MAYE MSK	KRME	PAR MA	€ 65-0713056		ot Applicable
Suite, Apt.	11. etc 1120/5.W.6cave	28. Mailing Address 26. S. AH S. MS. Suite, Apt #, etc. 27. // 20/5.W.6	oam		6. Certificate of Status Desired		Additional equired
City & State					6. Election Campaign Financing		<u> </u>
23 MIAN		28 Miami Fl			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country Zip 22/5/ Coun				8. This corporation owes or has paid the cu		
24 38 55 25 U.S.A. 29 33/56 30 9. Name and Address of Current Registered Agent				Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
			- Again				
SEBAI, SUBILI				81 Name NoNE			
11201 SW 60TH AVE.			82	82 Street Address (P.O. Box Number is Not Acceptable)			
, MI	AMI FL 33156		83				
			84	City		85 Zip	Code
l :				•	FL	. ' '	
SIGNATURE	Signature, typed or proclest came of respected agent	and telle if applicable (NOTE R	Sel	oai -	poration submits this statement for the purpose of tion's board of directors. I hereby accept the appropriate of the purpose o	٦8	
12.	OFFICERS AND I	DIRECTORS	13.	1 ,	resident	Change	Addition
TITLE	HERNANDEZ, CARLOS	1.1 II			SEBAI, SOBHI	C Cuange	P. Nadilion
NAME	And the Aller of Weller			ADDRESS	1000 11201 S.W. 60 a		
STREET ADDRESS	MAIMI FL		1.4 CITY - S		Miami FL 33156	-	
CITY-ST-ZIP			2.1 TITLE	1-211		Change	Addition
NAME	SEBAI, SOBHI 22		2.2 NAME				
STREET ADDRESS	11201 S.W. 60 ave		2.3 STREET	ADDRESS			
CITY-ST-ZIP	Miami FL. 33156		2. 4 CITY-	ST-ZIP			
TITLE	DELETE 3.13					Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3 3 STAEET				
CITY-ST-ZIP			3 4. CITY-1	ST-ZIP	·	Change	Addition
TITLE		☐ DELETE	41 TITLE	ĺ		C. Citalinge	
NAME			4 2 NAME				
STREET ADDRESS			4.3 STREET	<u> </u>			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - S 5.1 TITLE	11 - ZIP		Change	Addition
NAME			5.2 NAME			-	
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-5				
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-2IP			6.4 CITY-S	ST - ZIP			1017

14. Thereby 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 suppliemental 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

SIGNATURE:

SESA1 - RESIDENT 1/13/98

3>5-2259200