

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

**PROFIT
CORPORATION
ANNUAL REPORT
1998**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000099655 (8)
1. Corporation Name
ALPINE CONSTRUCTION MANAGEMENT CORP.

Principal Place of Business

6555 NW 36TH STREET
300
MIAMI FL 33166
US

Mailing Address

6555 NW 36TH STREET
300
MIAMI FL 33166
US

FILED
Jan 27 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/10/1996

4. FEI Number

65-0718054

Applied For
Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

**6. Election Campaign Financing
Trust Fund Contribution**



**\$5.00 May Be
Added to Fees**

**8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.**



Yes No

2. Principal Place of Business

2a. Mailing Address

21 14214 S.W. 53 St.
Suite, Apt. #, etc.

26 14214 S.W. 53 Street
Suite, Apt. #, etc.

22
City & State

27
City & State

23 Miami, FL
Zip Country

28 Miami, FL
Zip Country

24 33175 Dade
Country

29 33175 Dade
Country

9. Name and Address of Current Registered Agent

**DE ARMAS, J A
255 UNIVERSITY DRIVE
CORAL GABLES FL 33134**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 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 agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

T ☒ DELETE
TITLE
NAME **PUIG, RAUL**
STREET ADDRESS **6555 N.W. 36 ST., STE 300**
CITY-ST-ZIP **MIAMI FL**

P ☐ DELETE
TITLE
NAME **SUAREZ, AURORA**
STREET ADDRESS **6555 N.W. 36 ST., STE 300**
CITY-ST-ZIP **MIAMI FL**

VP ☐ DELETE
TITLE
NAME **TORRES, ARLENE**
STREET ADDRESS **6555 N.W. 36 ST., STE 300**
CITY-ST-ZIP **MIAMI FL**

S ☒ DELETE
TITLE
NAME **RODRIGUEZ, MARIO**
STREET ADDRESS **6555 N.W. 36 ST., STE 300**
CITY-ST-ZIP **MIAMI FL**

☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Treasurer** ☐ Change ☒ Addition
1.2 NAME **Hugh Patrick Brown**
1.3 STREET ADDRESS **14214 S.W. 53 Street**
1.4 CITY-ST-ZIP **Miami, FL 33175**

2.1 TITLE **President** ☒ Change ☐ Addition
2.2 NAME **Suarez, Aurora**
2.3 STREET ADDRESS **14214 S.W. 53 Street**
2.4 CITY-ST-ZIP **Miami, FL 33175**

3.1 TITLE **Vice President** ☒ Change ☐ Addition
3.2 NAME **Torres, Arlene**
3.3 STREET ADDRESS **14214 S.W. 53 Street**
3.4 CITY-ST-ZIP **Miami, FL 33175**

4.1 TITLE **Secretary** ☐ Change ☒ Addition
4.2 NAME **Matilde Quero**
4.3 STREET ADDRESS **14214 S.W. 53 Street**
4.4 CITY-ST-ZIP **Miami, FL 33175**

☐ Change ☐ Addition
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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.

SIGNATURE:

SIGNATURE REQUIRED

1/19/98

CR2E034 (10/97)