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

PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000014933 (0)

LAKES PARK CONSTRUCTION COMPANY

Principal Place of Business

Mailing Address

FILED Apr 28 1998 8:00am Secretary of State



960 SUNTRUST INTERNATIONAL CENTER 1 SOUTHEAST 3RD AVENUE MIAMI FL 33131		960 SUNTRUST INTERNATIONAL CENTER 1 SOUTHEAST 3RD AVENUE MIAMI FL 33131			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	\neg
					02/14/1997	
2. Principal Place of Business		2a. Mailing Addres	S		4 El Number Applied For	\dashv
21		26			65-67-33328 Not Applicable	le
Sulte, Apt. #, etc.		Suite, Apt. #, et	c.		SR 75 Additional	7
22		27			5. Certificate of Status Desired Fee Required	
	City & State				Election Campaign Financing \$5.00 May Be	
23		28	· 		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Count	ry	This corporation owes or has paid the current year Intangible	-
24	[25]	[29] [30]			Personal Property Tax due June 30. Yes No	4
	9. Name and Address of Curre	ant Hegistered Agent	8	1 Name	10. Name and Address of New Registered Agent	{
	ZENCWAIG, LESLIE ALAN	ACUTED	الم	Name	,	
	SUNTRUST INTERNATIONAL	CENTER	ER 82 Street /		t Address (P.O. Box Number is Not Acceptable)	\Box
	OUTHEAST 3RD AVENUE		8	3	——————————————————————————————————————	\dashv
MIA	MI FL 33131		"	1		
			8	4 City	FL 85 Zip Code	٦
11 Pursuant to	o the provisions of Sections 607 05	02 and 607 1508 Florida	Statutes the abo	ve-named	d corporation submits this statement for the purpose of changing its registered	귀
office or re	egistered agent, or both, in the Staten (amiliar with, and accept the obli-	te of Florida. Such change	was authorized t	by the corp	prporation's board of directors. I hereby accept the appointment as registered	۱ ٔ
•	n lamiliar with, and accept the ook	ganons of, Section 607.00	us, monda sialul	55.		- [
SIGNATURE	Signature, typod or printed name of registered a	gent and title if applicable	(NOTE: Registered A	gent signature	re required when reinstating) DATE	- ,
12.	OFFICERS A	ND DIRLCTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
THE		DELE	TE 1.1 TITLE		PID Change Additio	in S
NAME			1.2 NAMI	.	SIXTA CASTILLO	
STREET ADDRESS			1.3 STRE	ET ADDRESS		
CITY-ST-ZIP			1.4 CITY	ST-ZIP	MIAMI LAKES, FLA 33014	8
TITLE		☐ DELE	TE 2.1 TITLE		☐ Change ☐ Additio	ın C
NAME			2.2 NAMI			
STREET ADDRESS			2.3 STRE	ET ADDRESS		
CITY-ST-ZIP			2. 4 CITY	- ST - ZIP		_
TITLE		☐ DELE	TE 3.1 TITLE		Change	חו
NAME			3.2 NAME			
STREET ADDRESS			33 STRE	ET ADDRESS		
CITY-ST-ZIP		Dour	3.4. City		Character T Addition	_
TITLE		☐ DELE			☐ Change ☐ Additio	WI
NAME			4 2 NAM			
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NAME DEDECT ADDRESS			5.2 NAME			-
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		DELE	5.4 CITY- TE 6.1 TITLE		Change Additio	_
TITLE		☐ DEEE			Ly Change Ly Addition	"
NAME CYPTET APPROVE			6.2 NAM8			
STREET ADDRESS	\subset	_)		T ADDRESS		1
CITY-ST-ZIP	ertify that the information symplicid	with this filling does not go	6.4 CITY- alify for the exem		ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information	\dashv

I hereby certify that the information supplied with this filling 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 of the receiver of 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 chapted by on an attachment with an address.

City actilla 11h

R2E034 (10/97)