1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Mar 22, 1999 8:00 am **Secretary of State**

03-22-1999 90095 031 \*\*\*150.00

D	OCUMENT_#_	Pg	70	99	0	29	30	<u> 19</u> =
1.	Corporation Name			00	<b>O</b>			,

C.A.C. CONSTRUCTION SERVICE CORP.

Principal Place of Business 12945 SW 72 TERRACE MIAMI FL 33183

21

24

SIGNATURE

TITLE

NAME

Mailing Address

12945 SW 72 TERRACE **MIAMI FL 33183** 

DO NOT WRITE IN THIS SPACE

				•		- 1	DO NOT WHITE IN THE		
						3	Date Incorporated or Qualifed		
						- }	04/01/1997		
Principal Pla	ce of Business	2a. Mailing Address				4	FEI Number		Applied For
•		26					65-0741076		Not Applicable
Suite, Apt. #,	etc.	27	Suite, Apt. #, etc.			5	Certifcate of Status Desired		75 Additional ee Required
City & State		28	City & State			6	Election Campaign Financing  Trust Fund Contribution		.00 May Be ded to Fees
Zip	Country 25	29	Zip	Co.	untry <sub>.</sub>	8	. This corporation owes the current year In Personal Property Tax.	tangible	
9. Name and Address of Current Registered Agent						10			
					81 Name	-			-

CICERO, ALINA 12945 SW 72 TERRACE **MIAMI FL 33183** 

PD

		10. Name and A	Address of New	Registered A	gent		
81	Name						
82	Street Addres	s (P.O. Box Num	ber is Not Accep	table)			
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.

- {	0.0.1	Signature, typed or printed name of registered agent and title if app
	12.	OFFICERS AND DIRECT

(NOTE: Registered Agent signature required when reinstating) ORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ Addition Change □ DELETE 1.1 TITLE 1.2 NAME CICERO, ALINA

12945 SW 72 TERRACE 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33183** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change □ DELETE TITLE 2.1 TITLE CICERO, CARLOS R 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 12945 SW 72 TERRACE MIAMI FL 33183 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 3.1 TITLE TITLE

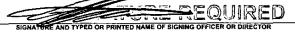
3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition

☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS

STREET ADDRESS 6.4 CITY-ST-ZIP 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, with all other like empowered.



Change

Addition

CR2E034 (11/98)