## 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 # 1. Corporation Name P97000031139 (3)

**FILED** 

Apr 06 1998 8:00am

Secretary of State

VALLADARES C	ONTRACTOR C	ORP.				
Principal Place of Busine	P.O.	Mailing A	ddrore			{
Principal Place of Business Mailing Address  459 N.W. 132ND PLACE 459 N.W. 132ND PLACE MIAMI FL 33182 MIAMI FL 33182						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
				·		04/07/1997
2. Principal Place of Bus	2a. Maitin	2a. Mailing Address			4. FEI Number Applied For	
21	26				65-0762289 Applied For	
Suite, Apt #, etc.	27				5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State	City &	City & State			6. Election Campaign Financing \$5.00 May Be	
23	28	·			Trust Fund Contribution	
Zip	Country	Zip	-	Country		8. This corporation owes or has paid the current year Intangible
24	25 e and Address of Co	29	30	<u> </u>		Personal Property Tax due June 30. Yes No  10, Name and Address of New Registered Agent
·		illelit Ledistelen s	- Agait	B1	Name	
VALLADARES					140.110	
459 N.W. 132ND PLACE			82	Street	Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33	182			83		
				84	City	85   Zip Code
					,	FL
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 by	od or profed name of register	od newst and life if Arrair a	blo (NOTE F	Registered Age	ent signature	e required when reinstating) DATE
12.		AND DIRECTORS	(10121	13.	on angulator o	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE Pres	si dent		DELETE:	1.1 TITLE		President ( Change Addition !
NAME Ander	es H. Va	ladares		1.2 NAME		Andres H. Valladares
STREET ADDRESS 459	N.W. 13.	2 Place		1.3 STREET	ADDRESS	459 N.W. 132 Place
CITY-ST-ZIP H'4	N.W. 13.	30182		1.4 CITY-S	T-ZIP	Hiam: Pl 23/82
TITLE			DELETE	2.1 TITLE	-	☐ Change ☐ Addition
NAME				2.2 NAME		
STREET ADDRESS				2.3 STREET	ADORESS	
CITY-ST-ZIP				2. 4 CITY-5	ST-ZIP	
TITLE			DELETE	3.1 TITLE		↑ Change ☐ Addition
NAME				3.2 NAME		
STREET ADDRESS				3.3 STREET	ADDRESS	
CITY-ST-ZIP				3.4 CITY-5	ST-ZIP	
TITLE			☐ DELETE	4.1 TITLE		Change
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET		
CITY-ST-ZIP			Torier	4.4 C(TY - S	T-ZIP	[7] X
TITLE			DELETE	5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET		
CITY-ST-ZIP			DELETE	5.4 CITY - S	T- ZIP	The Thirt
TITLE		Á	DELETE	6.1 TITLE		Change Addition
NAME		A		6.2 NAME		
STREET ADDRESS	ľ	i 11		6.3 STREET	ADDRESS	

14. Thereby certify that the information suppli-indicated on this annual report or supplier officer or director of the corporation or the Block 12 or Block 13 if changed, or on an Andres H. Valladares SIGNATURE:

03/18/1998 (305)220\_4673

with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information the 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 allower or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in allower with an address.