FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT FLORIDA DÉPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS . 1998 DOCUMENT # P97000048738 (8)ZARAHEMLA CONSTRUCTION CORP Principal Place of Business Mailing Address 21220 N.E. 20 Ct. 21220 N.E. 20 Ct. MIAMI, FL 33179 MIAMI, FL 33179 06/03/97 4. FEI Number 2. Principal Place of Business 2a. Malling Address 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State

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9. Name and Address of Current Registered Agent

CASTOLLO, ERNESTO 21220 N.E. 20 CT.

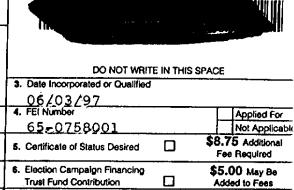
MIAMI, FL 33179

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SIGNATURE:

FILED May 26 1998 8:00am Secretary of State



8. This corporation owes or has paid the current year intangible

Yes

Personal Property Tax due June 30.

4/30/98

(305)466-0765

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

10. Name and Address of New Registered Agent

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.

Country

Name

City

SIGNATURE							
12.	Bignature-styped or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS	(NOTE: I		required when reinstating)		DATE	
TITLE		DELETE	13.	ADDITIONS	CHANGES TO OFFIC		
	180	DELETE	1.1 TITLE			☐ Change	Additio
NAME	CASTILLO, ERNESTO		1.2 KAME				
STREET ADDRESS	21220 N.E. 20 Ct.		1.3 STREET ADDRESS				
CITY-ST-ZWP	<u>MIAMI, FL 33179</u>		1.4 CITY+ST-ZIP				
TITLE		DELETE	2.1 TILE			☐ Change	Addition
NAME			22 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY+ST-ZIP			2. 4 CITY-ST-ZIP				
TITLE		DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
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TITLE		ELETE	4.1 TITLE			☐ Change	Addition
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CITY-ST-ZIP			4.4 CITY+ST+ZIP	###15		/	1 _
TITLE		ELETE "	5.1 TITLE		A 4 4 7 A	✓ Change	Addition
NAME		•	5.2 NAME				/
STREET ADDRESS			5.3 STREET ADDRESS	•		フノつン	2/2
CITY-ST-ZIP			5.4 CITY - ST - ZIP			MJ'	70
TITLE		ELETE	6.1 TITLE			☐ Change	Addition
NAME			62 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CiTY+ST-ZIP				
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 supplementary 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 todate empowered to effect 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 attractment with an another.							

Ernesto Castillo