SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE; \$750).

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

C/TY-ST-ZIP

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000060518 (2)

H & M BUILDING CONTRACTORS, INC.

Principal Place of Business Mailing Address 100 WEST 64TH TERRACE 100 WEST 64TH TERRACE HIALEAH FL 33012 HIALEAH FL 33012 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/11/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 4 Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MORALES, HERMENEJILDO 100 WEST 64TH TERRACE Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33012 83 84 Zip Code 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. **PSD** TITLE 1.1 TITLE __ DELETE Change Addition MORALES, HERMENEJILDO NAME 1.2 NAME 100 WEST 64TH TERRACE STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL 33012 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE TD DELETE 2.1 TITLE Change Addition MORALES, EUGENIA NAME 2.2 NAME 100 WEST 64TH TERRACE STREET ADDRESS 2.3 STREET ADDRESS HIALEAH FL 33012 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE 3.1 TITLE DELETE ___ Change Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE 5 1 TITLE ___ DELETE ___ Addition NAME 5.2 NAME

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.

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

1/2/94

6.4 City-ST-ZIP

Change

Addition

CR2E034 (5/98)

FILED

Jul 09 1998 8:00am

Secretary of State