## 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 # P97000086587 (7)

L.J. CONTRACTORS, INC.

Principal Place of Business

7334 SW 21ST ST MIAMI FL 33155 Mading Address

7334 SW 21ST MIAMI FL 33155

## FILED May 08 1998 8:00am Secretary of State



| MIAMI FL 33155   |  | MIAMI FL 33155  |                               | DO NOT WRITE  | DO NOT WRITE IN THIS SPACE   |                             |                           |  |
|--|--|---|-------------------------------|---|--|-----------------------------|---------------------------|--|
|  |  |   |                               |   | 3. Date Incorporated or Qualified  |                             |                           |  |
|  |  |   | ·                             | <b></b>   | 10/06/1997   |                             |                           |  |
|  | lace of Business   | 2a. Mailing Address<br>26 2327 N. W.  | 105                           | •   | 4. FEI Number 65-0786456   | <del></del>                 | Applied For               |  |
| 21 3337 N. W. 9 ST · 26 3327 N. W. Suite, Apt. #, etc. |  |   | 7                             |   | 05-0700438   | _ CR 76                     | Not Applicable Additional |  |
| 22   | , i etc.   | 27  |                               |   | 5. Certificate of Status Desired   | 7                           | Required                  |  |
| City & State   | 9 . 17 ./  | City & State  | · ,                           |   | 6. Election Campaign Financing   | \$5.0                       | O May Be                  |  |
| 23 MIA   |  |   | prida                         | du Trust Fund Contribution                            |  | Added to Fees               |                           |  |
| Zip  | Country Zp   |   | Country                       |   | <ol><li>This corporation owes or has paid</li></ol>  | ·                           |                           |  |
| 24 <i>33/</i>  |  | 29 33/25  | 30 20                         | de  | Personal Property Tax due June 3   |                             | □No                       |  |
| 411  | 9. Name and Address of Curre   | ent Hegisterea Agent  | 81                            | Name  | 10. Name and Address of New Reg  | istered Agent               |                           |  |
| ALVAREZ, LILLIAM                                       |  |   |                               |   |  |                             |                           |  |
| 7334 <b>SW</b> 21ST<br>MIAMI FL 33155                  |  |   |                               | 82 Street Address (P.O. Box Number is Not Acceptable) |  |                             |                           |  |
| MIA  | WH FL 33133  |   | 83                            |   | <del></del>  | ·                           |                           |  |
|  |  |   | _                             | ļ.,   |  | ·                           |                           |  |
|  |  |   | 84                            | City  |  | FL  85   Z1                 | p Code                    |  |
| 11. Pursuant i   | to the provisions of Sections 607.05   | 02 and 607.1508, Florida Statute  | os, the above                 | e-named   | corporation submits this statement for the pu  | roose of changing           | its registered            |  |
| office or re<br>agent. La                              | egi <b>ste</b> red agont, or both, in the Stat<br><b>m fam</b> iliar with, and accept the obli | te of Florida. Such change was a<br>gations of, Section 607,0505, Flo         | uthorized by<br>xida Statute: | y the corp<br>s.                                      | poration's board of directors. I hereby accept   | the appointment a           | as registered             |  |
| SIGNATURE  |  | J   |                               | -   |  |                             |                           |  |
|  | Signature typed or proteid name of regerered a   |   | Hogistered Age                | ent signature   | required when reinstating)   | DATE                        |                           |  |
| 12.  |  | ND DIRECTORS  | 13.                           |   | ADDITIONS/CHANGES TO OFFICE  |                             |                           |  |
| TITLE  | PSTD   | ☐ DELETE  | 1.1 TITLE                     | l   | l  | Change                      | e 🔲 Addilion              |  |
| NAME   | ALVAREZ, LILLIAM   |   | 1.2 NAME                      | ļ   |  |                             |                           |  |
| STREET ADDRESS   | 7334 SW 21ST   |   | 1.3 STREET                    | )   |  |                             |                           |  |
| CITY-ST-ZIP<br>TITLE                                   | MIAMI FL 33155   | DELETE  | 1.4 CITY - S                  | 11 - ZIP  | VARESIDENT.<br>JOSE ALVAREZ.<br>2327 N.W.95T<br>HIANI Fl. 33125                            | Change                      | Addition                  |  |
| NAME   |  | C DECENT  | 2.1 TITLE                     |   | LOSE ALVAREZ.  | Onlarige                    | , Est radiiion            |  |
| STREET ADDRESS   |  |   | 2.2 NAME<br>2.3 STREET        | ADDRESS   | 2327 N.W.957   |                             |                           |  |
| CITY-ST-ZIP  |  |   | 2.4 CITY-                     |   | 419NI F1.33125   |                             |                           |  |
| TITLE  |  | DELETE  | 3.1 TITLE                     | 31-511  | _  | ☐ Change                    | Addition                  |  |
| NAME   |  |   | 3.2 NAME                      | i   |  | <u>.</u>                    | _                         |  |
| STREET ADDRESS   |  |   | 3.3 STREET                    | ADDRESS   |  |                             | ,                         |  |
| CITY-ST-ZIP  |  |   | 34 CITY-                      | ST - Z#P  |  |                             |                           |  |
| TITLE  |  | ☐ DELETE  | 4.1 TITLE                     |   |  | ☐ Change                    | Addition                  |  |
| NAME   |  |   | 4. 2 NAME                     |   |  |                             |                           |  |
| STREET ADDRESS   |  |   | 4.3 STREET                    | ADDRESS   |  |                             |                           |  |
| CITY-ST-ZIP  |  |   | 4.4 CITY- S                   | T-7IP   |  |                             |                           |  |
| TITLE  |  | DELETE  | 5.1 TITLE                     |   |  | L. Change                   | e 🔲 Addition              |  |
| NAME   |  |   | 5.2 NAME                      |   |  |                             |                           |  |
| STREET ADDRESS   |  |   | 5.3 STREET                    | - 1   |  |                             |                           |  |
| CITY-ST-ZIP  |  | T DELETE  | 54 CHY-S                      | T-7IP   |  | Chann                       | - Addition                |  |
| TITLE  |  | L'1 DETERE  | 6.1 TITLE                     |   |  | L Change                    | Addition                  |  |
| NAME<br>OTREET APPRICA                                 |  |   | 62 NAME                       | 1000000   |  | ·                           |                           |  |
| STREET ADDRESS   |  |   | 63 STREET                     | i   |  |                             |                           |  |
| CITY-ST-ZiP  | ertify that the information supplied   | with this filing does not qualify fo  | 64 CITY-S                     |   | ed in Section 119.07(3)(i), Florida Statutes. I fi   | urther certify that the     | ne information            |  |
| indicated<br>officer or o                              | on this annual report or supplemen   | ital annual report is true <b>and acc</b><br>ceiver or trustee empowered to e | urate and th                  | at my sig   | nature shall have the same legal effect as if required by Chapter 607, Florida Statutes; a | made un <b>d</b> er oath; t | that I am an              |  |