FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name

- Comment Bloggi

P97000108033 (6)

LIBRA CONSTRUCTION CORPORATION

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address				
10081 S. NOB. HILL CIRCLE		10061 S. NOB. HILL CIRCLE				
TAMARAC FL 33321		TAMARAC FL 33321			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	ROE:
					12/23/1997	
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26				Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	7 _{(P}	h		8. This corporation owes or has paid the curren	,
24	25		30		Personal Property Tax due June 30. 10. Name and Address of New Registered Age	
M. Name						
FABREGAS, KARINA A						
8410 W. FLAGLER ST.,STE.208				82 Street Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33144			83			
			84	City	FL	35 Zip Code
11 Pursuant to the provisions of Soctions 607.05.02 and 607.15.08 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Stgnature Typod or printed name of registered age	ent and too it applicable (NOTE	Registered Age	eut signature re	equired when reinstating) DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN 12
TITLE	PT	☐ DELETE	11111LF	J		Cnange 🔲 Addition
NAME FABREGAS, KARINA A			1.2 NAME			
STREET ADDRESS	8410 W. FLAGLER ST.,STE.2	08	1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33144	DELETE	1.4 CITY - S	1 - ZIP		
TITLE	PT	DELETE	2.1 TITLE		H	Change L Addition
NAME	RADAELLI, FABIAN C	^^	2.2 NAME	. !		
STREET ADDRESS	8410 W. FLAGLER ST.,STE.2	08	2.3 STREET	i		
CITY-ST-ZIP TITLE	MIAMI FL 33144	DELETE	2. 4 CITY - 5 3.1 TITLE	31 · 21P		Change Addition
NAME		Drefut	3.1 HILE 3.2 NAME			Charge L. Addition
STREET ADDRESS				ADDDCCC		
			3.3 STREET 3.4. CITY - S			
CITY-ST-ZIP TITLE		□ DELETE	4 1 TITLE	51 · ZUF		Change Addition
NAME			4 2 NAME			
STREET ADDRESS			4 3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 City - S	ł		ł
TITLE		DELETE	5.1 TITLE	-		Change Addition
NAME			5.2 NAME	1	_ / / _	-
STREET ADDRESS			5.3 STREET	ADDRESS	$M \rightarrow -l lh \Omega$	
CITY-ST-ZIP			5.4 CITY - S		12W 214148	
TITLE		DELETE	61 TITLE	1	70000251064	Phange L Addition
NAME			6.2 NAME		70000251060 -05/05/9801035008	-
STREET ADDRESS			6.3 STREET	ADDRESS	***150.00	
CITY-ST-ZIP			6.4 CITY - S	1- ZIP		
14. I hereby of	ertify that the information supplied w	ith this filing does not qualify for	r the exemp	tion stated	f in Section 119.07(3)(i), Florida Statutes. I further certify	that the information
indicated on this annual report or supplemental armual report is type and accurate and that my signature shall have the same logal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee employeded to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of changed, or on an attachment with an address.						