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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000009257

1. Corporation Name

FILED Mar 01, 1999 8:00 am Secretary of State 03-01-1999 90191 017 ***150.00

| COLOM | CONSTRUCTION CORP. | | | | | | | | |
|-----------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------|----------------------|----------------------|---------------------------------------------------------------------------|---------------------------|-------------------------------|------------------------|
| Principal Place | of Rusiness | Mailing Address | | | | | H WANT WATER |)8:10 1911B :1001 | |
| | | - | | | | | | | |
| 7090 SW 30TH RD. 7090 SW 30TH RD. MIAMI FL 33155 MIAMI FL 33155 | | | | | | | | | |
| WINNI LE 00100 | | | | | | DO NOT WRIT | E IN THIS | SPACE | |
| | | | | | | 3. Date Incorporated or Qualifed | | | |
| | | | | | | 01/29/1998 | | | |
| | ace of Business | 2a. Mailing Address | J.,- ,, | | | 4. FEI Number | | X Ap | plied For |
| 21 7090 SW 30th Pd 26 SAME as | | | | | | • | | No | t Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | | 5. Certificate of Status Desired | | \$8.75 A | Additional |
| 22 | | | | | | 3. Certificate of Status Desired | | Fee Re | quired |
| City & State City & State | | | | _ | | 6. Election Campaign Financing | | \$5.00 | May Be |
| 23 Migal, FL. 28 | | | | | | Trust Fund Contribution | | Added t | o Fees |
| Zip | Country | Zip | Country | , | | 8. This corporation owes the curre | ant year Int | | auf |
| 24 3315 | | 29 30 |) | | | Personal Property Tax. | | Yes | MS No |
| | 9. Name and Address of Current | Registered Agent | | | | 10. Name and Address of New R | egisterea . | Agent | |
| COL | OM, RAUL J | | 81 | Name | Cole | DAI, KAN J. | | | |
| 5500 S.W. 77TH CT. | | | | Street | Address | (P.O. Box Number is Not Accepta | ble) | | |
| #117 | | | | 8 | 92 | 1 500 12 16 | RR. | | |
| 1 | , vii FL 33155 | | 83 | | | | | | |
| iviirsi: | III 1 E 00 100 | | 84 | City | Λ. | | | 85 Zip (| Code |
| | | | | | | 141 | FL | | 144 |
| 11. Pursuant | to the provisions of Sections 607.0502 egistered agent, or both, in the State of | 2 and 607.1508, Florida Statutes, of Florida, Such change was auth | the above orized by | e-named the corpo | corpora oration's | tion submits this statement for the board of directors. I hereby accep | purpose of t the appoi | changing its ntment as re- | registered gistered |
| agent. I a | m familiar with, and accept the obligat | ions of, Section 607.0505, Florida | a Statutes | | | • | • • | , | - |
| SIGNATURE | | | | | | | | | 1 |
| | Signature, typed or printed name of registered agen | | gistered Ager | nt signature r | required wh | en reinstating) ADDITIONS/CHANGES TO OF | DATE AN | ID DIDECTO | DC IN 12 |
| 12. | | | | | 1 | | TOERS AN | Change | Addition |
| TITLE | 00:04 04! | | | COLOM, KAUL 1. | | | | | |
| NAME | 5500 S.W. 77TH COURT #117 | | 1.2 NAME | | 82 | 51 SW 12 HEAR | | | |
| STREET ADDRESS | | | | ADDRESS | u | AMI, FL- 33149 | | | |
| CITY-ST-ZIP | MIAMI FL 33155 | ☐ DELETE | 1.4 CITY-S | T-ZIP | 1000 | | | Change | Addition |
| TITLE | | | 2.1 TITLE | . [| | | | □ onange | L3 Fidulion |
| NAME | COLOM, ROBERTO | | 2.2 NAME | | | | | | |
| STREET ADDRESS | 2900 S.W. 80TH AVE. | | | TADDRESS | | | | | - 1 |
| CITY-ST-ZIP | MIAMI FL 33155 | | 2. 4 CITY-5 3.1 TITLE | ST-ZIP | - | | | ☐ Change | Addition |
| TITLE | | | | | | 0 100 | | | |
| NAME | | ; | 3.2 NAME | | POX | xe, Carlos 31 NW Əterr, A | 15 | 1 | |
| STREET ADDRESS | | | | TADDRESS | 52 | 31 NW Sterr, A | 11411 | , r | |
| CITY-ST-ZIP | | □ oct etc | 3.4. CITY-5 | T-ZIP | <u> </u> | | | Change | Addition |
| TITLE | | ☐ DELETE | 4.1 TITLE | Ì | | | | ☐ cuanãe | L Addition |
| NAME | | | 4. 2 NAME | | | | | | . |
| STREET ADDRESS | | | 4.3 STREE | TADDRESS | | | | | |
| CITY-ST-ZIP | | | 4.4 CITY-S | T-ZIP | - | | | - Channa | □ Addition |
| TITLE | | ☐ DELETE | 5.1 TITLE | , | | | | Change | Addition |
| NAME | | | 5.2 NAME | | | | | | |
| STREET ADDRESS | | | | ADDRESS | | | | | } |
| CITY-ST-ZIP | | □ ac: ctr | 5.4 CITY-S 6.1 TITLE | I-ZIP | - | | | Change | Addition |
| TITLE | | ☐ DELETE | | | | | | ☐ Change | ☐ Addition } |
| NAME | | | 6.2 NAME | | | | | | |
| STREET ADDRESS | | | | TADDRESS | | | | | } |
| COVET ZID | | | 6.4 CITY S | T-ZIP | 1 | | | | |

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, ex on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-06-99

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