Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90020 022 \*\*\*150.00

## 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 # P98000067469

1. Corporation TRINTEC	CONSTRUCTION INC.									
Dringing Place	of Business	Maili	ing Address	_			-	1 <b>98</b>    <b>188</b>    14 <b>8</b>    188   189    189    189    189    189    189    189    189    189    189    189    189    189     189	<b>i e</b> nii 1 <b>16</b> 11 <b>3</b> 1010	((HU 101) (TO)
Principal Place of Business Mailing Address  AZM CAM ACOND AVENUE 4724 C.W. 4224D AVENUE										
4721 S.W. 132ND AVENUE 4721 S.W. 132ND AVENUE MIAMI FL 33175 MIAMI FL 33175										
								DO NOT WRITE IN TH	IS SPACE	
								3. Date Incorporated or Qualifed 08/03/1998		
2. Principal Pl	ace of Business	2a. N	failing Address					4. FEI Number	<u> </u>	plied For
21		26						65 0861621		t Applicable
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 A Fee Re	
22 City & State	A		City & State	~			$^{+}$	6. Election Campaign Financing	\$5.00	May Be
23		28					ļ	Trust Fund Contribution	Added t	- 1
Zip	Country	Z	lip.	Coun	try			8. This corporation owes the current year	ntangible	<u>.                                    </u>
24	25	29		30				Personal Property Tax.		<b>X</b> No
	9. Name and Address of Curren	t Registe	red Agent		1	r		10. Name and Address of New Registere	d Agent	
ROMERO, JUAN F				81	Name					
4721 S.W. 132ND AVENUE					82	Street Addr	Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33175				-	83					_
				-		a			85 Zip (	Cado
					84	City		F	L 85 Zip (	- Due
' office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	ot Florida.	. Such change was a	utnorizea	DV 1	the corporation	on's	tion submits this statement for the purpose board of directors. I hereby accept the app	of changing its ointment as re	registered gistered
Olomation L	Signature, typed or printed name of registered agen		·· · · · · · · · · · · · · · · · · · ·	Registered /	\gen	nt signature require	tw be			
12.	OFFICERS AN	D DIREC		13.		<del></del>		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO  Change	RS IN 12 Addition
TITLE	D .		☐ DELETÉ	1.1 TITL					□ cuange	
NAME	SCHVARTZ, PETULIA N									}
STREET ADDRESS	1121 01111 102110 1110					ADDRESS		•		
CITY-ST-ZIP					1.4 CITY-ST-ZIP				Change	Addition
TITLE	<u> </u>		2.1 1110 2.2 NAM		İ					
NAME STREET ADDRESS	4721 S.W. 132ND AVENUE	`				ADDRESS				
				2.4 CΠ						ŀ
CITY-ST-ZIP TITLE			3.1 TITI		,,,,			Change	Addition	
NAME				3.2 NAM	Æ					
STREET ADDRESS				3.3 STF	REET	TADDRESS				1
CITY-ST-ZIP				3.4. CIT	Y- S	ST-ZIP				
TITLE			☐ DELETE	4.1 TITI	E				Change	☐ Addition
NAME				4. 2 NA	ME	İ				
STREET ADDRESS				4.3 STF	REET	TADDRESS				
CITY-ST-ZIP				4.4 CIT	Y-S1	T-ZIP				
TITLE			☐ DELETE	5.1 TITI					Change:	☐ Addition
NAME				5.2 NA					•	
STREET ADDRESS				1		TADDRESS		•		
CITY-ST-ZIP	<u> </u>			5.4 CIT		T-ZIP		- dili-latera		from a state
TITLE			☐ DELETE	6.1 TiTT					☐ Change	Addition
NAME				6.2 NAJ	ИE	1				l

CITY-ST-ZIP 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 alachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAM SIGNING OFFICER OR DIRECTOR *3054*8079<u>36</u>