

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

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90087 002 ***158.75

DOCUMENT #

1. Corporation Name

JURADO CONSTRUCTION & DINIPEX, INC.

Principal Place of Business
**3900 N.W. 79 Avenue
Suite 644
Miami, FL 33166**

Mailing Address
**3900 N.W. 79 Avenue
Suite 644
Miami, FL 33166**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
December 18, 1998

4. FEI Number

65-0894067

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust-Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 25 29 30
9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BODIN, GLORIA R
2100 PONCE DE LEON BLVD
STE 920
MIAMI FL 33134**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. 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)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	President	<input type="checkbox"/> DELETE
NAME	Luz Elena Duran Texeira	
STREET ADDRESS	3900 N.W. 79 Ave., Suite 644	
CITY-ST-ZIP	Miami, FL 33166	
TITLE	Executive Vice President	<input type="checkbox"/> DELETE
NAME	Gustavo Jurado	
STREET ADDRESS	3900 N.W. 79 Avenue, Suite 644	
CITY-ST-ZIP	Miami, FL 33166	
TITLE	Vice President of Operations	<input type="checkbox"/> DELETE
NAME	Jose Viana	
STREET ADDRESS	3900 N.W. 79 Avenue, Suite 644	
CITY-ST-ZIP	Miami, FL 33166	
TITLE	Secretary	<input type="checkbox"/> DELETE
NAME	Luz Elena Duran Texeira	
STREET ADDRESS	3900 N.W. 79 Avenue, Suite 644	
CITY-ST-ZIP	Miami, FL 33166	
TITLE	Treasurer	<input type="checkbox"/> DELETE
NAME	Gustavo Jurado	
STREET ADDRESS	3900 N.W. 79 Avenue, Suite 644	
CITY-ST-ZIP	Miami, FL 33166	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

☐ Change ☐ Addition

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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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 8, 1999

305/387-0686

Date

Daytime Phone #