2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #*P990*00066459.

C!C GENERAL CONTRACTON, IN

Principal Place of Business

63655.W.33 Pt MIAMI F133155 Mailing Address

63655W33PC HIAMI, FI33155

2. Principal Place of Business		3. Mailing Address		DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0936833		
Suite, Apt, #, etc. City & State		Suite, Apt. #, etc.				
		City & State	·			
Zip	Country	Zip	Country Country	5. Certificate of Status Desired \$8.7		
£ Nor	ne and Address of Curr			7. Name and Address of New Registered Agent		

FILED May 16, 2002 8:00 am Secretary of State

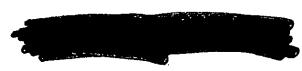
05-16-2002 90055 038 ***150.00

Applied For

\$8.75 Additional

Fee Required

Not Applicable



t. Hallo and Hadron C. Carrier Street	,		 		
Educado Martin		Name			
Eduando MARTÍN 63655W 33 Pt. 41AMI, FI 33155		Street Address (P.O. I	Box Number is Not Acceptable)		
YIAMI, FI 39155					
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n day at A	1039	1		<u> </u>	
The above named entity submits this statement for the purpose of	of changing its register	red office or registered ag	gent, or both, in the State of Florida.		
	•				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable	. (NOTE: Registers	ed Agent signature required when r	reinstating) DATE		
This corporation is eligible to satisfy its Intangible	EFF ADMIT ARE		10. Election Campaign Financing		00 May Be
Tax filing requirement and elects to do so. (See criteria on back)	हा क्षेत्र है अपन जेता बेन्द्रका नेप्रकार है जे	विकास कार्या के विकास	Trust Fund Contribution.	Added	d to Fees
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3. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP-

SIGNATURE:

TREET ADDRESS

29/02 305-669-8397