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**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # \$48121

1. Corporation Name

CONCT	RUCTION RESOURCES, INC											
Principal Place	e of Business	Mailing Address	_			'	18611012 ISI AIRA	19191   1818		. 61611 8181		
10791 SW 67 AVE		10791 SW 67 AVE										
MIAMI FL 30156		MIAMI FL 33156				DO NOT MIDITE IN THIS SPACE						
US		US			-	DO NOT WRITE IN THIS SPACE  3. Date ir corporated or Qualifed						
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2. Principa Pl	lace of Business	2a. Mailing Address			-	4. FEI Nu				-		lied For
21		26				65-0	? <u>566</u> 47					Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifo	ite of Status	Desired			. <b>/ ⊃</b> A∉ ee Rec	aditional
22		City & State				•		<u>.                                    </u>				
City & State	e	<del></del>					<ol> <li>Campaign F und Contribut</li> </ol>	-			ded to	May Be
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24	25	29	30	,			al Property T		icini your i	Ye		[]No
	9. Name and Address of Curren		1301				and Address		Registere	d Agent		
		<u> </u>	8	1 Name								
	KI, VIJAY G			0 04	0.4.4.000	/D O . Davi	Number is N	at Assant	obla)			
	91 SW 67TH AVENUE		18	2 Street	Address	(P.O. Box	Number is N	ot Accept	able)			
MIAI	MI FL 33156		8	13								
			8	City					F	85	Zip C	code
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State	of Florida. Such change was	authorized b	ve-named	corpora	tion submi	s this statem irectors. I he	ent for the reby acce	purpose pt the app	of changi ointment	ng its r as reg	negistered pistered
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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 contribution 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 exerce this reports are given by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or a management with an address, with all other like engagement.

6.4 CITY- ST- ZIP

SIGNATURE:

CITY-ST-ZIP