FILE NOW: FILING FEE AFTER MAY 1 IS \$55.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S69772**

(9)

ATLANTIC DEMOLITION CONTRACTORS, INC.

Principal Place of Business Mailing Address 7331 CORAL WAY 7331 CORAL WAY **SUITE 245 SUITE 245** MIAMI FL 33155 MIAMI FL 33155-1471 Date Incorporated or Qualified 07/24/1991 3a, Date of Last Report 04/03/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0288038 21 26 Not Applicable Suite, Apt. #, etc. Suite Apl. # etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees $Z_{\rm ID}$ Country Ζıp Country 8. This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 24 29 30 Florida Statutes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent AGUILERA, OMAR Name 7331 CORAL WAY, #245 **B2** Street MIAMI FL 33155 83 84 'AMI 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 for 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 languages the obligations of, Section 607,0505, Florida Statutes. CARI SIGNATURE itered agent and title it applicable Registered Agent six required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) 12. PD DELETE Change Addition 1.1 TITLE Till:E AGUILERA, OMAR G NAME 12 NAME 7331 CORAL WAY #245 1.3 STREET ADORESS STREET ADDRESS **MIAMI FL** 1.4 CITY-ST-ZIP CITY-ST VD DELETE ☐ Change Addition 2.1 TITLE TITLE AGUILERA, OSCAR R 2.2 NAME NAME 7331 CORAL WAY #245 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CHY-ST-ZIP 2. 4 CiTY-ST-ZiP DELETE Change Addition 3.1 TITLE 11TLF AGUILERA, MARIA 3.2 NAME NAME 7331 CORAL WAY #245 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 3.4. CITY - ST - ZIP CITY - ST - ZIP DELETE Addition Change THLE 4.1 TITLE DELLIS, DEAN NAME 4. 2 NAME 7331 CORAL WAY #245 STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 4.4 CITY - ST - ZIP CITY-S1-ZiP DELETE Addition 51 TITLE TiftE NAME 52 NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CITY ST-209 DELETE Change Addition 6.1 TITLE THLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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

SIGNATURE:

appears in Block 12 or Block

CHY-SI-78

WAR AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

77 305 266-2036

FILED

May 08 1997 8:00am

Secretary of State