

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # S69772 (9)
 1. Corporation Name
ATLANTIC DEMOLITION CONTRACTORS, INC.



Principal Place of Business: 7331 CORAL WAY SUITE 245 MIAMI FL 33155
 Mailing Address: 7331 CORAL WAY SUITE 245 MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/24/1991**

4. FEI Number: **65-0288038**

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 or has paid the current year intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business (21-23)
 2a. Mailing Address (24-26)
 Suite, Apt. #, etc. (22)
 City & State (23)
 Zip (24) Country (25)

9. Name and Address of Current Registered Agent
AGUILERA, OSCAR R
7331 CORAL WAY, #245
MIAMI FL 33155

10. Name and Address of New Registered Agent (81-85)
 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 Sections 607.0505, Florida Statutes.

SIGNATURE: *Oscar Aguilera* **Oscar Aguilera** **4/29/98**
 Signature typed or printed name of registered agent and title, if applicable (NOT: Registered Agent signs are required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	SDT	<input type="checkbox"/> DELETE
NAME	AGUILERA, MARIA	
STREET ADDRESS	7331 CORAL WAY #245	
CITY-ST-ZIP	MIAMI FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	DELLIS, DEAN	
STREET ADDRESS	7331 CORAL WAY #245	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Aguilera, Oscar R	
1.3 STREET ADDRESS	7331 Coral way, #245	
1.4 CITY-ST-ZIP	Miami, FL 33155	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	900002546953	
4.3 STREET ADDRESS	-06/04/98--01007--035	
4.4 CITY-ST-ZIP	***150.00	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 the attachment with an address.

SIGNATURE: *Oscar Aguilera* **Oscar Aguilera** **4/29/98**

CR2E034 (10/97)