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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Prace of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V10774

(0)

Mailing Address

PINO-FONTICIELLA CONSTRUCTION, CORP.

FILED
May 08 1997 8:00am
Secretary of State



4/20/97

Daytime Phone

11400 W. FLAG Suite 205 Miami Fl	LER ST.	11400 W. FLAGLER ST. SUITE 205 MIAMI FL 33174-4007		Date loop received at Qualified.	3a. Date of Last Report
				3. Date Incorporated or Qualified 01/31/1992	04/05/1996
2. Principa Pia	ace of Business	2a. Mailing Address		4, FEI Number	Applied For
21		26		65-0309554	Not Applicable
Suite Apt i	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	,	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
4	25	29	30		Yes L No
	9. Name and Address of Curre	nt Registered Agent	81 Nan	10. Name and Address of New Re	gistered Agent
), ERNESTO R.				
	0 W. FLAGLER ST.		82 Stre	et Address (P.O. Box Number is Not Acceptab	ole)
	E 205			***************************************	
MIAN	AII FL		83		
			84 City		85 Zip Code
				ed corporation submits this statement for the p	FL & zap cods
SIGNATURE	n fairmar with, and accept the oblights are typed or pooled have of registered a			orporation's board of directors. I hereby acceptive required when reliestating)	DATE
2.		OD DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
PUE	D	DELETE	1.1 TITLE	ADDITIONS/OFFACEUTO CITTO	Change Addition
₽¥WE	PINO, ERNESTO R.		1.2 NAME		
ETREET ADDRESS	13360 S.W. 25 STREET		1.3 STREET ADDRES	<u>, </u>	
TIY - ST - ZIP	MIAMI FL		1.4 CITY-ST-ZIP	~	
olif	D	DELETE	2.1 TiTLE		Change Additio
.AME	FONTICIELLA, ARMANDO J.		2.2 NAME		
TREEL ADDRESS	13340 S.W. 25 STREET		2.3 STREET ADDRES	s	
CHY-ST ZIP	MIAMI FL		2 4 City-ST-ZIP		
Thif		DELETE	3.1 TITLE		Change Additio
IAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRES	s	
aty-st-zip			3.4. CITY-ST-ZIP		·
III.E		☐ DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			43 STREET ADDRES	s (
COY-\$1-7-P			4.4 Crty - SY-ZIP		
PILE		☐ DELETE	5.1 TITLE		Change Additio
AME.			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRES	\$	
CHY-SI-Zif	Parameter Company of the Company of	100.500	5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Additio
NAME			6.2 NAMÉ		
STREET ADDRESS			6.3 STREET ADDRES	s	
DELY-ST-ZIP		- 1 (a) A) (a 49) (a 4	6.4 CITY - ST- ZIP	110 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	- 16
information	n indicated on this about a condition	europlemental annual report le	true and accurate a	n stated in Section 119.07(3)(i), Florida Statute nd that my signature shall have the same lega is report as required by Chapter 607, Florida S	al offect so if mode under asth: th