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Mar 24 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
 1997



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

DOCUMENT # V25624 (0)
 1. Corporation Name
E.C.O.A.T. CONSTRUCTION COMPANY OF FLORIDA, INC.



Principal Place of Business Mailing Address
189 NW 51 AVENUE SUITE 201 MIAMI FL 33126 US
4700 NW 7 ST 208 MIAMI FL 33126-2252 US

3. Date Incorporated or Qualified **03/30/1992** 3a. Date of Last Report **07/01/1996**

2. Principal Place of Business
 21 **187 N.W. 51 AVE, REAR**
 Subc. Apt. #, etc.
 22
 City & State
MIAMI, FLA.
 Zip Country
33126 US

2a. Mailing Address
 26 **187 N.W. 51 AVE, REAR**
 Subc. Apt. #, etc.
 27
 City & State
MIAMI, FLA.
 Zip Country
33126 US

4. FEI Number **65-0328856** Applied For Not Applicable
 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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
RODRIGUEZ, EDUARDO
187 N.W. 51 AVENUE
MIAMI FL 33126

10. Name and Address of New Registered Agent
 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 607.0507 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, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent Signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	P	RODRIGUEZ, EDUARDO	187 NW 51 AVE MIAMI FL	<input type="checkbox"/> DELETE			
	V	RODRIGUEZ, CATHY	187 NW 51 AVE MIAMI FL	<input type="checkbox"/> DELETE			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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14. I do hereby certify that the information submitted 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 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 on Form F-12 or Form F-13 if changed, or on an attachment with an address.

SIGNATURE: *Eduardo Rodriguez*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/97 305 447 9862
 DATE AND TELEPHONE NUMBER

CR2E034 (9/96)