

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

FILED

Apr 09 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 # V59320 (4)

1. Corporation Name  
PROFESSIONAL GENERAL CONTRACTORS INC.



Principal Place of Business  
250 CATALONIA AVE.  
#400  
CORAL GABLES FL 33134

Mailing Address  
250 CATALONIA AVE.  
#400  
CORAL GABLES FL 33134-8730

3. Date Incorporated or Qualified 08/21/1992 3a. Date of Last Report 08/06/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number 65-0353833 Applied For Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired X \$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAMOS, EZEQUIEL  
250 CATALONIA AVE.  
#400  
CORAL GABLES FL 33134

81 Name CARLOS R. Ramos  
82 Street Address (P.O. Box Number is Not Acceptable) 250 CATALONIA AVE  
83  
84 City Coral Gables FL 85 Zip Code 33134

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, Section 607.0505, Florida Statutes.

SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS |                     | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
|----------------------------|---------------------|---|--|
| TITLE                      | 1.1 TITLE           | Change Addition                                       |  |
| NAME                       | 1.2 NAME            | Change Addition                                       |  |
| STREET ADDRESS             | 1.3 STREET ADDRESS  | Change Addition                                       |  |
| CITY - ST - ZIP            | 1.4 CITY - ST - ZIP | Change Addition                                       |  |
| TITLE                      | 2.1 TITLE           | Change Addition                                       |  |
| NAME                       | 2.2 NAME            | Change Addition                                       |  |
| STREET ADDRESS             | 2.3 STREET ADDRESS  | Change Addition                                       |  |
| CITY - ST - ZIP            | 2.4 CITY - ST - ZIP | Change Addition                                       |  |
| TITLE                      | 3.1 TITLE           | Change Addition                                       |  |
| NAME                       | 3.2 NAME            | Change Addition                                       |  |
| STREET ADDRESS             | 3.3 STREET ADDRESS  | Change Addition                                       |  |
| CITY - ST - ZIP            | 3.4 CITY - ST - ZIP | Change Addition                                       |  |
| TITLE                      | 4.1 TITLE           | Change Addition                                       |  |
| NAME                       | 4.2 NAME            | Change Addition                                       |  |
| STREET ADDRESS             | 4.3 STREET ADDRESS  | Change Addition                                       |  |
| CITY - ST - ZIP            | 4.4 CITY - ST - ZIP | Change Addition                                       |  |
| TITLE                      | 5.1 TITLE           | Change Addition                                       |  |
| NAME                       | 5.2 NAME            | Change Addition                                       |  |
| STREET ADDRESS             | 5.3 STREET ADDRESS  | Change Addition                                       |  |
| CITY - ST - ZIP            | 5.4 CITY - ST - ZIP | Change Addition                                       |  |
| TITLE                      | 6.1 TITLE           | Change Addition                                       |  |
| NAME                       | 6.2 NAME            | Change Addition                                       |  |
| STREET ADDRESS             | 6.3 STREET ADDRESS  | Change Addition                                       |  |
| CITY - ST - ZIP            | 6.4 CITY - ST - ZIP | Change Addition                                       |  |

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 appears in Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)