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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## **DOCUMENT # V64248**

1. Corporation Name

MIAMI CONSTRUCTION & DEVELOPMENT, INC.

Principal Plac	e of Business	Mailing Address				/ BIBIT BIBIT BIBIT B	.coc 01011 (001
P.O. BOX 526865 P.O. BOX 526865 MIAMI FL 33152-6865 MIAMI FL 33152-6865							
					DO NOT WRITE IN THI	S SPACE	
<u> </u>					3. Date Incorporated or Qualifed	5 OF AGE	
					09/16/1992		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Apr	plied For
21 26					65-0356312		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					_	\$8.75 A	dditional
27					5. Certificate of Status Desired	Fee Re	quired_
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country	<u> </u>	ountry	*	8. This corporation owes the current year in	7	<b>п</b> и.
24	25	29 30	1		Personal Property Tax.	_/\	□No
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Registere	ı Ağent	
TRILLES, JORGE E							
10275 NW 129 ST.			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
HIA	LEAH GARDENS FL 33016		83	<del> </del>	·		· · · · · · · · · · · · · · · · · · ·
İ	•			1			
			84 City		F	85 Zip C	ode
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes, the	above	e-named corp	poration submits this statement for the purpose of	of changing its	registered
agent. I a	am familiar with, and accept the oblig	ations of, Section 607.0505, Florida St	atutes	<b>i.</b>	on's board of directors. I hereby accept the appointment of directors and the property of the appointment of		
12.		ND DIRECTORS 1			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D/P	☐ DELETE 1.1	TITLE			☐ Change	Addition
NAME	TRILLES, JORGE E	1.2	NAME				
STREET ADDRESS			STREET	TADDRESS			
CITY-\$T-ZIP	HIALEAH GARDENS FL 33016		CITY-S	T-ZIP			
TITLE	DVS	DELETE 2.1	TITLE			☐ Change	Addition
NAME	CABRERA, JUAN	1	NAME				
STREET ADDRESS		2.3	STREET	TADDRESS	en and the second of the secon		
C/TY-ST-ZIP	MIAMI FL 33031		CITY-S				
TITLE		☐ DELETE 3.1	TITLE			Change	☐ Addition
NAME		3.2	NAMÉ				
STREET ADDRESS		3.3	STREET	TADDRESS			
CITY-ST-ZIP		F71	CITY-S	ST-ZIP			
TITLE	ا سنه د ا	☐ DELETE 4.1	TITLE			Change	Addition
NAME		4.1	NAME				
STREET ADDRESS	,	4.3	STREET	TADDRESS			
CITY-ST-ZIP			CITY-S	T-ZIP			
TITLE			5.1 TITLE			☐ Change	☐ Addition
NAME		5.2	NAME				
STREET ADDRESS				ļ			
	·			TADDRESS	•		
CITY-ST-ZIP		5.4	CITY-S	i i	•		
CITY-ST-ZIP TITLE		5.4 DELETE 6.1		i i	•	☐ Change	☐ Addition

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 an attachment with an address, with all other like empowered.

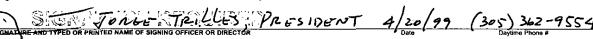
6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP



- 0222935

FILED

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90203 030 \*\*\*150.00