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

**PROFIT** CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

CITY: ST. ZIE



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 07 1997 8:00am

Secretary of State

APRIL 2, 97 (305) UV5-1849

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V66833

CAPITAL CITY CONSTRUCTION CORPORATION

Principal Piace of Business Mailing Address 6367 SW 40 ST 6367 SW 40 ST MIAMI FL 33155-4825 MIAMI FL 33155 3a. Date of Last Report 02/15/1996 3. Date Incorporated or Qualified 09/24/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0360380 21 26 Not Applicable Suite, Apr. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country This corporation has liability for intangible tax under s. 199.032, Yes No 25 29 30 Florida Statutes 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name RODRIGUEZ, J. RAFAEL 6367 BIRD RD 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33155** 83 84 City Zip Code 85 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 of 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Star at mill typed or jair had name of magatered againt and title if appricable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. DELETE Change Addition 1.1 TITLE THE RODRIGUEZ JOSE A 1.2 NAME NAME **425 ALMERIA AVE** 13 STREET ADDRESS STREET ADDRESS **CORAL GABLES FL** 1.4 CITY-ST-ZIP C(17 - S1 - 7)F Addition DELETE Change 2.1 TITLE THLE RODRIGUEZ, RAFAELA M. 2.2 NAME NAME 425 ALMERIA AVE 2.3 STREET ADDRESS STREET ADDRESS CORAL GABLES FL 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TILL 3.2 NAME 3.3 STREET ADDRESS STREET ADDIRESS 3.4. CITY - ST - ZIP CITY ST-ZIP DELETE Change Addition 4.1 TITLE THEF 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CHY-ST 7th Addition DELETE Change 5.1 TITLE THUE 5.2 NAME NAME 5.3 STREET ADDRESS STHEET ADDRESS 54 CITY-ST-ZIP City \$1-791 DELETE Change Addition 61 TITLE LILE 6.2 NAME MAIME 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

I JOSE A. RODRIGUEZ

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