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

PROFIT CORPORATION ANNUAL REPORT

1998

287 CIRCLE DRIVE HIALEAH FL 33010

2. Principal Place of Business

Suite, Apt. #, etc

SIGNATURE:

City & State

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V67914

(4)

287 CIRCLE DRIVE HIALEAH FL 33010

2a. Mailing Address

City & State

Suite, Ap1. #, etc.

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9. Name and Address of Current Registered Agent

HUERTA CONSTRUCTION, CORP.

25

HUERTA, ORESTE 287 CIRCLE DRIVE

HOLITA CONOTIDOTION, CONF.						
Principal Place of Business	Mailing Address					

FILED
May 01 1998 8:00am
Secretary of State



DO NOT WHITE IN THIS SPACE

3. Date Incorporated or Qualified

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes

Not Applicable

10/01/1992 4, FEI Number

82 Street Address (P.O. Box Number is Not Acceptable)

65-0359348

5. Certificate of Status Desired

Election Campaign Financing
 Trust Fund Contribution

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

HIALEAH FL 33010								
		83					1	
			84	City	у	85 Z	ip Code	1
			L	<u> </u>	<u>'FL</u>]
office or re	o the provisions of Sections 607.0502 and 607.150 ogistered agent, or both, in the State of Florida. Suc n familiar with, and accept the obligations of, Section	h change was auth	orized b	v the o	ned corporation submits this statement for the purpose of corporation's board of directors. I hereby accept the appe	changin pintment	g its registered as registered	
SIGNATURE	Signature, typed or printed name of registered agent and title if applica	tile (NOTE: Be	cistered Ac	ent sions	natura required when reinstating) DATE			ير ا
12.	OFFICERS AND DIRECTORS	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12	di
TITLE	PD	DELETE	1.1 TITLE			Chang		200
NAME	HUERTA, ORESTE		1.2 NAME					1 _
STREET ADDRESS	287 CIRCLE DRIVE		1.3 STREET ADDRE		ESS			POFF
CITY-ST-ZIP	HIALEAH FL		1.4 CITY-	ST-ZIP				រុ
TITLE		DELETE	2.1 TITLE			Chang	e Addition	2
NAME			2.2 NAME					ĺ
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NAME		4	6.2 NAME					-
STREET ADDRESS		l	6.3 STREE		SS			
CITY-ST-ZIP			6.4 CITY-		total - Davids 110 07/0/0 Closids Disk in 14 miles	if the at i		1
indicated (on this annual report or supplemental annual report	is true and accurat	le and th	at my	stated in Section 119.07(3)(i), Florida Statutes. I further cer signature shall have the same legal effect as if made und	leŕ oath;	that I am an	
officer or of Block 12 of	firector of the corporation or the receiver or trustee or Block 13 if changed, or on an attachment with an	empowered to exect address.	cute this	report	d as required by Chapter 607, Florida Statutes; and that m	y name	appears in	1

Country

81 Name

30