

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

DOCUMENT # V73428

(7)

95 MAY -1 PM 11:36

1. Corporation Name

VALLARTA CONSTRUCTION, CORP.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**237 NW 8TH AVENUE
HOMESTEAD FL 33030**

Mailing Address

**237 NW 8TH AVENUE
HOMESTEAD FL 33030**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/21/1992

3a. Date of Last Report

04/07/1994

4. FBI Number

65-0439774

Applied For

☐ Not Applicable

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

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

10. Name and Address of New Registered Agent

**RAMIREZ, HORACIO
237 NW 8TH AVENUE
HOMESTEAD FL 33030**

81 Name

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

24988 SW 128 PATH

83

84 City

PRINCETON

FL

85 Zip Code

33032

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

Signature typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**PTD
RAMIREZ, HORACIO
237 NW 8TH AVENUE
HOMESTEAD FL**
**VTD
RAMIREZ, VIRGILIO
237 NW 8TH AVENUE
HOMESTEAD FL**
**VD
LORENTE, RAMON
2428 SW 13TH ST
MIAMI FL**
**VICE - PRESIDENT
LUIS RAMIREZ
916 NW 3TH AVE.
HOMESTEAD FL 33030**
**VICE PRESIDENT
SAUL RAMIREZ
916 NW 3TH AVE
HOMESTEAD FL 33030**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☒ Change ☐ Addition
**24988 SW 128 PATH
PRINCETON FL 33032**
☐ Change ☐ Addition
**24943 SW 128 CT
PRINCETON FL 33032**
☐ Change ☐ Addition
☐ Change ☒ Addition
☐ Change ☐ Addition
☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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, as changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

04/23/95 (307) 258 9293