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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCU 1. Corporatio	MENT # V7	74219	(9)									
1	CONSTRUCTION		` '									
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ł												
Principal Plac	e of Business		Mailing Address				L ROMEL BLIGHTS BOOK MEDIU TERMIT	OUT HER DI	III BILUK DIDIL	titu viti	1	
13039 SW 887	'H LANE	13039 SW 88TH LANE										
MIAMI FL 331	36		MIAMI FL 33186			i	DO NOT WRITE IN THIS SPACE					
US		US					3. Date Incorporated or Qualified					
								10/26/1992				-
1	lace of Business		2a. Mailing Address				4. FEI Number			A	oplied For	
21			26					65-0367158				ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			j	5. Certificate of Status Desire	id [8 8.75 . Fee Re	Additional	
City & State			City & State				6 Starting Council a Starting					
23			28			ł	 Election Campaign Finance Trust Fund Contribution 	ing [May Be to Fees	
Zip	Countr		Zip Cou			, — -	8. This corporation owes or has paid th					
24	25	2	a	30				Personal Property Tax due] No
	9. Name and Addre	ss of Current Req	istered Agent		81			10. Name and Address of No	w Regis	tered Age	nt	
CHIRINO, ALEX N						Name			·			
1900 SOUTH TREASURE DRIVE, #7D						Street /	Addres	s (P.O. Box Number is Not Acc	eptable)			
MIAMI FL 33141						ļ			·			
}				ı	83	<u> </u>						
						City		FL 85 Zip Code				
11. Pursuant office or t agent. I a	to the provisions of Sect egistered agent, or both m familiar with, and acc	tions 607.0502 and n, in the State of Flo ept the obligations	l 607.1508, Florida Statu orida. Such change was of, Section 607.0505, F	ites, the al authorized lorida Stat	oove yd by estu	s-named / the corp s.	corpor	ation submits this statement for n's board of directors. I hereby	the pur accept t	pose of cha he appoint	anging it ment as	s registered registered
SIGNATURE	*											
Signature, typed or printed name of registered agent and life it applicable. (NOTE: Registe 12. OFFICERS AND DIRECTORS 13						nt signature	required	when reinstating) ADDITIONS/CHANGES TO		DATE S AND DI	RECTOR	S IN 12
TITLE	D DELETE				1,1 TITLE			ADDITIONO/OFIANGEO TO			Change	Addition
NAME					1.2 NAME					_	0-	
STREET ADORESS					1.3 STREET ADDRESS							
CITY-ST-ZIP					TY-S	T-ZIP				_	_	
TITLE	DELETE 2.1				2.1 TITLE				-		Change	Addition
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STREET ADDRESS				2.3 ST	REET	ADDRESS						}
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STREET ADORESS						ADDRESS						ĺ
CITY-ST-ZIP				4.4 CI								}
TITLE			DELETÉ	5.1 117					-		Change	Addition

5.4 CITY - ST- ZIP 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.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

SIGNATURE: X

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

DELETE

Change

Addition

FILED

Jan 22 1998 8:00am

Secretary of State