

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**


FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90532 016 ***158.75

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DOCUMENT # L11415

1. Entity Name
ZURQUI CONSTRUCTION SERVICE, INC.



Principal Place of Business
**10421 NW 28 ST
UNIT 102-D
MIAMI FL 33172
US**

Mailing Address
**10421 NW 28 ST
UNIT 102-D
MIAMI FL 33172
US**



2. Principal Place of Business
9755 S.W. 40th Terrace

3. Mailing Address
9755 S.W. 40th Terrace

Suite, Apt. #, etc.
M

CHECK HERE IF MAKING CHANGES

City & State
Miami FL 33165

City & State
Miami, FL.

Zip
33165

Country
Dade

Zip
33165

Country
Dade

4. FEI Number
65-0139632

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GONZALEZ, EDDY, JR
8401 SW 92ND ST
MIAMI FL 33156**

7. Name and Address of New Registered Agent

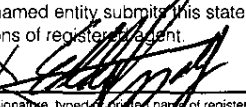
Name
Eddy Gonzalez, JR

Street Address (P.O. Box Number is Not Acceptable)
9755 S.W. 40th Terrace

City
Miami

FL Zip Code
33165

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: **1/17/03**

(NOTE: Registered Agent signature required when reinstating)

FILE NOW! FEES \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GONZALEZ, EDDY, JR 8401 SW 92ND STREET MIAMI FL 33156	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GONZALEZ, ANA 8401 SW 92ND STREET MIAMI FL 33156	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Eddy Gonzalez, JR. 9755 S.W. 40th Terrace, Miami FL 33165	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Ana Gonzalez 9755 S.W. 40th Terrace, Miami FL 33165	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like exemptions.

SIGNATURE:  **SIGNATURE REQUIRED** DATE: **1/17/03** DAYTIME PHONE #: **(305) 226-6100**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)