## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000107602 **DOCUMENT#** Adonai



## Sep 10, 2003 8:00 am Secretary of State 09-10-2003 90059 027 \*\*\*150.00

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City & State Mam  Zip C Country  30/74  Country  30/74  S. Certificate of Status Desired \$8.75 Additional Fee Required  7. Name and Address of Current Registered Agent  Name  10 NOTE Registered Agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  Signature. Typod or primed range of registered Agent agent signature required when remataling)  10. OFFICERS AND DIRECTORS  TITLE  NAME  10. OFFICERS AND DIRECTORS  TITLE  NAME  STREET ADDRESS  DITY, ST. Zip  NOTE, Registered Agent signature required when remataling and the contribution and t	DO NOT WRITE IN THIS SPACE										
Single Country 37174 Zip 20174 S. Certificate of Status Desired \$8.75 Additional Fee Required Fe	Number 69-1191831 A	Applied For Not Applicable									
Name Clara — Garcia  Street Address (P.O. Box Number is Not Acceptable)  IN THIS SPACE  Street Address (P.O. Box Number is Not Acceptable)  IN THIS SPACE  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  FL Zip Code 7 4  City Maa m., FL Zip Code 7 4  City Maa m., or both, in the State of Florida. I am familiar with, and acceptable to bilipations of registered agent.  SIGNATURE  Signature, hyped or printed name of registering agent planes applicable approximately applicable agent signature required when reinstalling)  January 1: May 1. Fee let 150.00  After May 1, Fee let 150.00  After May 1, Fee let 150.00  Amended UBR is \$55.00  Amended UBR is \$551.25  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  ITILE  INAME  CIPY 51-2IP  MIAME  CIPY 51-2IP  MIAME  CIPY 51-2IP  MIAME  CIPY 51-2IP  CITY 5	Fee Require										
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IN THIS SPACE  BOTO W. Flagler ST #  City Mam., FL Zip Code 7 4  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  Signature, typed or printed name of reduce agent. (NOTE: Registered Agent signature reduced when renstating)  January 1 May 1, Fee let 150.00  After May 1, Fee let 150.00  Annended: UBR is \$51.25  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  ITTLE  HAME  LIPEET ADDRESS  CITY-ST-ZIP  MIAME  LIPEET ADDRESS  CITY-ST-ZIP  MIAME  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	(										
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  Signature, typed or printed name of registered agent. (NOTE: Registered Agent signature required when reinstaing)  January 1 May 1, Fee let \$150.00  After May 1, Fee is \$550.00  After May 1, Fee is \$550.00  Amended UBR is \$61.25  Make Check: Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  TITLE  INAME  LIPET ADDRESS  GUY-S1-ZIP  TITLE  NAME  STREET ADDRESS  CUY-S1-ZIP  TOTAL TOTAL TITLE  NAME  STREET ADDRESS  CUY-S1-ZIP  TOTAL TOTAL TITLE  NAME  STREET ADDRESS  CUY-S1-ZIP	Number is Not Acceptable)										
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  Signature. Typed or printed name of reduced application. (NOTE: Registered Agent signature redurred when reinstating)  January 1: May 1: Fee let 150.00  After May 1: Fee let 150.00  Are May 1: Fee let 150.00  Are May 1: Fee let 150.00  Are May 1: Fee let 150.00  ITLE  ITLE  ITALE  INAME  SPECT ADDRESS  GETY-ST-ZIP  Milama Contribution  Trust Fund Contribution  Street Added to Fees  STREET ADDRESS  GETY-ST-ZIP  Milama Contribution  CITY ST-ZIP	U. flagler ST \$1										
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SIGNATURE    Signature, typed or printed name of region   agent accurate application   (NOTE: Registered Agent signature required when reinstating)   DATE											
January 1 May 1 Fee les \$50.00  After May 1, Fee is \$550.00  Amended UBR is \$61.25  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  IIILE  IIIAME  CIPEET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  P. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  **TITLE**  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	09/02/03	-									
Amended UBR is \$61.25  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  IIILE  IIAME  CIPEET ADDRESS  CITY-ST-ZIP  MIA AM' FL 33174  Trust Fund Contribution  Added to Fees  Trust Fund Contribution  Added to Fees  Trust Fund Contribution  Added to Fees		.00 May Be									
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CITY-S1-ZIP  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	207(3Vi) Florida Statutes I further certify that the	e 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 on an attachment with an address, with a other target my manufacture of the corporation of the receiver or trustee empowered.

SIGNATURE:

G OFFICER OR DIRECTOR

AHachment

## Adonai Design Construction, Inc.

8878 W. Flagler Street # 1 Miami, FL 33174 # 80 1000 107602

August 14, 2003

Florida Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Adonai Design constructon, Inc. #65-1151831"
Adonai Roofing, Inc. #65-0885532
2003 Uniform Business Report

Gentlemen:

This letter is to inform you our address has changed. Also be informed that Business Report Forms for the year 2003 for the above mentioned corporations were never received in our office.

Following our telephone conversation, we have enclosed check # 1/3/ & # 1/32, both in the amount of \$150 to be applied as payments for the annual corporate fee for the above mention corporations.

We ask you to credit this checks accordingly and to abate the late fee.

We apologized for the inconvenience and thank you in advance for your cooperation.

Respectfully,

Clara Garcia President

Enclosure:

Ck #//3/\_ \$150.00 Ck #//32-\$150.00