2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000009140

Entity Name: OLIVERA CONSTRUCTION, INC.

FILED Feb 05, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 995 OSPREY LANDING DRIVE LAKELAND, FL 33813 **Current Mailing Address: New Mailing Address:** P.O BOX 7174 LAKELAND, FL 338077174 FEI Number: 59-3550105 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: OLIVERA, FELIPE LUIS 995 OSPŔEY LANDING DRIVE LAKELAND, FL 33813 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition STANGL, ALEJANDRO R Name: Name: 6730 CRESENT LAKE DRIVE Address: Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: Title: Title: () Delete () Change () Addition STANGL, ALICIA ELENA Name: Name: 6730 CRESENT LAKE DRIVE Address: Address: LAKELAND, FL 33813 City-St-Zip: City-St-Zip: () Delete Title: Title: PD () Change () Addition OLIVERA, FELIPE JOSE Name: Name: 6739 CRESENT LAKE DRIVE Address: Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: Title: VD () Delete Title: () Change () Addition OLIVERA, FÈLIPE L Name: Name: Address: 995 OSPREY LANDING DRIVE Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: Title: SD Title: () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: FELIPE OLIVERA VP 02/05/2003

OLIVERA, MAGDALINE

LAKELAND, FL 33813

995 OSPREY LANDING DRIVE

Name:

Address: City-St-Zip: