

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2002 8:00 am
Secretary of State

03-12-2002 90269 046 ***150.00

0416639
 AV

DOCUMENT # K66392

1. Entity Name

TAMPA BAY CONSTRUCTION CO., INC.

Principal Place of Business

**11717 WINN ROAD
 RIVERVIEW FL 33569**

Mailing Address

**11717 WINN ROAD
 RIVERVIEW FL 33569**

2. Principal Place of Business

11717 WINN ROAD

3. Mailing Address

11717 WINN ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

RIVERVIEW FL

City & State

RIVERVIEW FL

4. FEI Number

59-2933251

Applied For

Not Applicable

Zip

33569

Country

HILLSBOROUGH

Zip

33569

Country

HILLSBOROUGH

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

6. Name and Address of Current Registered Agent

**LOPEZ, VICTOR
 11717 WINN ROAD
 RIVERVIEW FL 33569**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
 NAME **LOPEZ, VICTOR**
 STREET ADDRESS **11717 WINN ROAD**
 CITY-ST-ZIP **RIVERVIEW FL 33569**

TITLE **D** ☐ Delete
 NAME **LOPEZ, VICTOR PHILLIP**
 STREET ADDRESS **2913 W AILEEN**
 CITY-ST-ZIP **TAMPA FL 33607**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED VICTOR LOPEZ

2/27/02

813/671-9429

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)