

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

FILED
Apr 28, 2002 8:00 am
Secretary of State

04-28-2002 90579 024 ***150.00

DOCUMENT # *P000000 72535*

1. Entity Name

GENERAL Construction y Servicios NEFEL 2000, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6440 SW 20st

3. Mailing Address

1870 W 84st

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

HALEAH, FL

4. FEI Number

65-1028365

Applied For

Not Applicable

Zip

33351

Country

USA

Zip

33014

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name *SAUL ROMERO-VERA*

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

6440 SW 20st

City

Miami, FL

FL

Zip Code

33351

**DO NOT WRITE
IN THIS SPACE**

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) ☐

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	<i>P/DTS</i>
NAME	<i>SAUL Bernardo Romero-VERA</i>
STREET ADDRESS	<i>6440 SW 20st</i>
CITY-ST-ZIP	<i>Miami, FL 33351</i>
TITLE	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Saul Romero*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/2 (305) 321-0692

Date

Daytime Phone #

CR2E034B (12/01)