

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2003 8:00 am
Secretary of State

03-19-2003 90168 035 ***150.00

DOCUMENT # 514939

1. Entity Name
R.P.A. CONSTRUCTION CORPORATION



Principal Place of Business
**5750 SW 45 TERR
CORAL GABLES FL 33114-2117
US**

Mailing Address
**901 PONCE DE LEON BLVD
SUITE 606
CORAL GABLES FL 33134
US**



2. Principal Place of Business

2338 Immokalee Road

3. Mailing Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#154

City & State

Naples, FL

City & State

same

Zip

34110

Country

Collier

Zip

same

Country

same

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-1769074

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DE LOS REYES, RAFAEL A
5750 SW 45 TERR
MIAMI, FL 33155**

7. Name and Address of New Registered Agent

Name

George A De Los Reyes

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

3906 Midshore Dr

City

Naples

FL

Zip Code

34109

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/17/03

FILE NOW!!! FEE IS \$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 **PD** ☒ Delete
NAME **DE LOS REYES, RAFAEL A**
STREET ADDRESS **5750 S.W. 45TH TERRACE**
CITY-ST-ZIP **MIAMI FL 33155**

TITLE **STD** ☒ Delete
NAME **DE LOS REYES, DULCE M**
STREET ADDRESS **5750 S.W. 45TH TERRACE**
CITY-ST-ZIP **MIAMI FL 33155**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **POSTD** ☐ Change ☒ Addition
NAME **George A De Los Reyes**
STREET ADDRESS **3906 Midshore Dr**
CITY-ST-ZIP **Naples, FL 34109**

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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CITY-ST-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 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 empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/03

Date

Daytime Phone #

0227105
AV

CR2E034 (10/02)