2002 UNIFORM BUSINESS REPORT (UBR)

Feb 20, 2002 8:00 am Secretary of State DOCUMENT # 517348 Entity Name MURVEGA PAVING COMPANY. INC. 02-20-2002 90126 003 ***150.00 Principal Place of Business Mailing Address 2975 S.W. 129TH AVENUE 2975 S.W. 129TH AVENUE MIAMI FL 33175 MIAMI FL 33175 Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1705210 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VEGA. ROLANDO Street Address (P.O. Box Number is Not Acceptable) 2975 S.W. 129TH AVENUE **MIAMI FL 33175** Zip Code for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The above named entity submits the statemen and title if applicable. Signature, typed or printer This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 μre ☐ Delete TITLE ☐ Addition AME vega; mireya NAME TREET ADDRESS 2975 S.W. 129TH AVENUE STREET ADDRESS ÎTY-ŞT-ZIP **MIAMI FL 33175** CITY-ST-ZIP ÎTLE Delete TITLE Change ☐ Addition AME VIZCAINO, JOSE O NAME REET ADDRESS 3451 SW 3RD AVE. STREET ADDRESS TY-ST-ZIP CITY-ST-ZIP MIAMI FL 33145 TLE ☐ Delete DP^{*} ☐ Change ☐ Addition AME VEGA, MIREYA NAME--- -REET ADDRESS 2975 S.W. 129TH AVENUE STREET ADDRESS TY-ST-ZIP MIAMI_FL 33175 CITY-ST-ZIP TLE VΡ Delete TITLE ☐ Change Addition AME VEGA, ROLANDO NAME REET ADDRESS 2975 S.W. 129TH AVENUE STREET ADDRESS TY-ST-ZIP CITY-ST-ZIP MIAMI FL 33175 TLE ☐ Delete TITLE Addition Change **AME** NAME REET ADDRESS STREET ADDRESS TY-ST-ZIP CITY-ST-ZIP 33175 ĪLE ☐ Delete TITLE ☐ Change ☐ Addition **∖**ME NAME REET ADDRESS STREET ADDRESS TY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filling 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.

FILED

Daytime Phone #