

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 548676

1. Entity Name

DAVCO CONTRACTING, INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90094 012 ***158.75

Principal Place of Business

13889 S. DIXIE HWY
MIAMI FL 33176
US

Mailing Address

13889 S. DIXIE HWY
MIAMI FL 33176-7221
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1820605

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DAVIS, HARRY P JR
11920 SW 89TH AVE
MIAMI FL 33176

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME DAVIS JR, HARRY P.
STREET ADDRESS 11920 SW 89TH AVE
CITY-ST-ZIP MIAMI FL 33176

TITLE VICE PRESIDENT ☐ Change ☒ Addition
NAME Roberto BLANCO
STREET ADDRESS 25892 SW 133 PLACE
CITY-ST-ZIP Homestead, FL 33032

TITLE ST ☐ Delete
NAME COLE, KIMBERLY D.
STREET ADDRESS 11920 SW 89TH AVE
CITY-ST-ZIP MIAMI FL 33176

TITLE VICE PRESIDENT ☐ Change ☒ Addition
NAME CARMEN BLANCO
STREET ADDRESS 25892 SW 133 PLACE
CITY-ST-ZIP Homestead, FL 33032

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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CITY-ST-ZIP

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:

HARRY P. DAVIS, JR. Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/4/2000 305 378 5791

CR2E034 (9/99)