

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 09, 2002 8:00 am
Secretary of State

07-09-2002 90379 041 ***150.00

DOCUMENT # 614466

1. Entity Name
CONSTRUMAT, INC.

Principal Place of Business
**1611 SOUTHWEST 32ND AVENUE
 MIAMI FL 33145-1829**

Mailing Address
**1611 SOUTHWEST 32ND AVENUE
 MIAMI FL 33145-1829**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2620647**

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

**VILLAAMIL, ANTHONY
 1611 SW 32 AVE
 MIAMI FL 33145**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Anthony Villaamil Anthony Villaamil 7/2/02
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 \$550.00
 After September 13, 2002 Fee will be \$750.00
 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	PD	<input type="checkbox"/> Delete
NAME	VILLAAMIL, ANTHONY	
STREET ADDRESS	1611 SW 32 AVE	
CITY-ST-ZIP	MIAMI FL 33145	
TITLE	DS	<input type="checkbox"/> Delete
NAME	VILLAAMIL, GLORIA H	
STREET ADDRESS	1611 SW 32 AVE	
CITY-ST-ZIP	MIAMI FL 33145	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(l), 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: Gloria H. Villaamil 7/2/02 305-4453673
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachment # 614466

B0188010

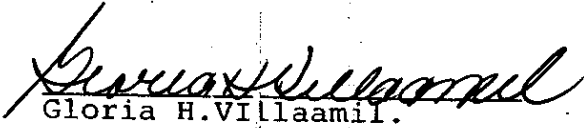
DIVISION OF CORPORATIONS
Uniform Business Report Filings
P.O.Box 1500
Tallahassee, Florida, 32302-1500

Re: *Construmat, Inc.*
Doc # 614466

July 2nd, 2002

We are enclosing the 2002 Uniform Business Report with our check for \$150.00. As we did not received any prior notice we are hereby requesting the waiving of the penalty in the amount of \$400.00. Please check in your records of prior years and verify that our company files on time.

Sincerely yours,


Gloria H. Villamil.