## 2001 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 718969**

2001 UNIFORM BUSINESS REPORT (UBR)							FILED				
DOCUMENT # 718969  1. Entity Name						Mar 20, 2001 8:00 am <sup>§</sup> Secretary of State					
ASSOCIATION OF CUBAN ENGINEERS, INC.							03-20-2001 90025				
Principal Place	e of Business	Mailing Address									
P.O. BOX 557575 MIAMI FL 39155- 33255-7575 MIAMI FL 39155- 33255-7575			55	-757	5						
2 Principal Pla	ace of Business	3. Mailing Address									
•							868) (166) 1911A 1911A BILLE (GII GIBII 61				
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.					DO NOT WRITE IN THIS	SPACE			
City & State		City & State				4. FEI Number S9-6245455 Applied For Not Applicable					
Zip Country		Zip Co		ountry		5. Certificate	of Status Desired	\$8.75 Add Fee Required			
	6. Name and Address of Current	Registered Agent			_		Address of New Registered				
the state of the s				Name .	KODRIGUEZ, JACINTO.						
IRMA BECERRA-FERNANDEZ 10901 SW 120 ST				Street Ad	Address (P.O. Box Number is Not Acceptable) ST						
10901 SW MIAMI FL (											
				City	M	IAMI	FL	Zip Code	175		
8. The above r	named entity submits this statement for	the purpose of changing its	register	ed office or	register	ed agent, or bot	th, in the state of Florida.		•		
	, Augusti	Jodin	1				2-1	5-20	p/.		
SIGNATURE	Signature, typed or printed name of segistant agent	ned title if applicable (NOTE	: Registere	d Agent signatu	ure required	when reinstating)	DATE	, ,,	<del>- 1</del>		
	FILE NOW: FEE IS \$61.25	Election Campaign     Trust Fund Contribution		ng 🗆		<b>0</b> May Be to Fees	Make Check Departmen				
10.	OFFICERS AND DIF		11.			ADDITIONS/CH.	ANGES TO OFFICERS AND D			5	
TITLE NAME	1000 0010 11111 11 000		TITL		P	ODRIGUEZ, JACINTO. Addition				(10/00)	
STREET ADDRESS				ET ADDRESS	14	251 SW 1851.					
CITY-ST-ZIP	MIAMI FL 33145 V	Delete	TITL	-ST-ZIP	77	IAMI,		Change	☐ Addition	CR2E037	
TITLE NAME	PLA, MARIO	Delete	NAM				MICHAEL	•		O	
STREET ADDRESS CITY-ST-ZIP	13972 SW 25TH ST			ET ADDRESS -ST-ZIP	" //	888 :	SW 72TES FL 33183	•			
TITLE TITLE	MIAMI FL 33175	Delete	_	-3(-2)	7			Change -	△ Addition →		
NAME	RODRIGUEZ, JACINTO	~~~	NAM		CH	LOY, AM	N 94 ST.				
STREET ADDRESS CITY-ST-ZIP	14251 SW 18TH ST MIAMI FL 33175			ET ADDRESS -ST-ZIP	M	IAMI	FL 33186	, > _			
TITLE	D	Delete	TITL		2	100	ROBIN AVE	Change	☐ Addition		
NAME STREET ADDRESS	DIAZ, OSCAR	•	NAM STRI	E Et address	_/	GDARTA 1190	ROBIN AVE				
CITY-ST-ZIP	10821 SW 33RD ST MIAMI FL 33165			-ST-ZIP	M	IAMI	SPRINGS, FL	33/	66		
TITLE	D	<b>Delete</b>	TITL	ſ	$\mathcal{D}_{\mathbf{g}_{\mathcal{L}}}$	rEODA	-FERNANDEZ	Change IRM	Addition		
NAME STREET ADDRESS	ACOSTA, MICHAEL 11501 SW 60TH TERR		NAM STRI	E Et address	DE	10 901	SW 12051				
CITY-ST-ZIP	MIAMI FL 33172	A /*	-	-ST-ZIP	M	IAMI,	FL, 3317	6		-	
TITLE NAME	D CHOY ANTONIO	Delete	TITL NAM		2	ANCHE	Z, ROBERT	Change	☐ Addition		
STREET ADDRESS	CHOY, ANTONIO 11821 SW 94TH ST			ET ADDRESS	الأك	911	Z, ROBERT SISTINA A	VE_			

12. 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 617, 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: