FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F88656 AMENDED 2003

1. Entity Name

MYERS CONSTRUCTION GROUP, INC.

FILED

03 SEP 12 AM 11:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900023175109
09/18/03--01063--006 **61.25

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
6710 SW 80 Street	6710 SW 80 Street
Suite, Apt. #, etc. #102	Suite, Apt. #, etc. #102
City & State Miami, FL	City & State Miami, FL
Zip 33143 Country USA	Zip 33143 Country USA

4. FEI Number 59-2782993 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Christopher Myers

Street Address (P.O. Box Number is Not Acceptable): 14438 SW 141 Place

City: Miami FL Zip Code: 33186

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 _____ DATE

(Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when name changed)

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D, Christopher Myers 14438 S.W. 141 Place Miami, FL 33186	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T/D, Ralph Myers 7721 197th Street East Bradenton, FL 34202	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Christopher Myers 9-11-2003 305-669-4567

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Christopher Myers

CR2E034B (12/02)