

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 26, 2001 8:00 am**  
**Secretary of State**

01-26-2001 90027 002 \*\*\*150.00

**DOCUMENT # F96000001354**

1. Entity Name

**MACH CONSTRUCTION CO., INC.**

Principal Place of Business

**2604 NW 124TH AVE  
 CORAL SPRINGS FL 33065**

Mailing Address

**2604 NW 124TH AVE  
 CORAL SPRINGS FL 33065**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**88-0185258**

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

**FERNANDEZ, YOLANDA  
 800 PARKVIEW DR., #1024  
 HALLANDALE FL 33009**

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

*YOLANDA FERNANDEZ* *Yolanda Fernandez*

*Jan 13/2001*

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, 2001 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  Delete  
 NAME **P AGUIAR, MANUEL**  
 STREET ADDRESS **11500 NW 56TH DR 3113 2604 NW 124th Ave**  
 CITY-ST-ZIP **CORAL SPRINGS FL 33076 33065**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **VP AGUIAR, LIZET**  
 STREET ADDRESS **11500 NW 56TH DR 3113 2604 N.W. 124th Ave**  
 CITY-ST-ZIP **CORAL SPRINGS FL 33076 33065**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
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TITLE  Change  Addition  
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 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

*Manuel Aguiar*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)