

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 13, 2006 08:00 AM
Secretary of State

DOCUMENT # G01321

1. Entity Name
AMERILUMBER HARDWARE & BUILDING MATERIAL,
INC.



Principal Place of Business

NC.
8260 S.W. 42 ST.
MIAMI, FL 33155

Mailing Address

NC.
8260 S.W. 42 ST.
MIAMI, FL 33155

DO NOT WRITE IN THIS SPACE



01042006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2326147

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

PORTELA, JOSE D.
6501 MAYNADA ST.
CORAL GABLES, FL 33146

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME PORTELA, ORLANDO
STREET ADDRESS 8260 SW 42ND ST
CITY-ST-ZIP MIAMI, FL 00000,

TITLE TS
NAME PORTELA, JOSE D
STREET ADDRESS 6501 MAYNADA ST
CITY-ST-ZIP CORAL GABLES, FL 00000,

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

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 exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other duly empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Orlando J Portela

Jan/11/06 (305) 662-2828
Date Date/Phone #