

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 29, 2002 8:00 am**  
**Secretary of State**

07-29-2002 90006 036 \*\*\*150.00

**DOCUMENT # G38641**

1. Entity Name

**COLUMBUS CONSTRUCTION OF DADE COUNTY, INC.**

Principal Place of Business

% THOMAS NELLEN  
 7555 S.W. 127TH ST.  
 MIAMI FL 33156-6015

Mailing Address

% THOMAS NELLEN  
 7555 S.W. 127TH ST.  
 MIAMI FL 33156-6015

2. Principal Place of Business

3. Mailing Address

**10502 SW 77 AVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
**MIAMI FL**

Zip

Country

Zip  
**33156**

Country

**USA**

4. FEI Number

**59-2294065**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**NELLEN, THOMAS**  
**7555 S.W. 127TH ST.**  
**MIAMI FL 33156-6015**

7. Name and Address of New Registered Agent

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

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  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PD**  
**NELLEN, THOMAS**  
**7555 S.W. 127TH ST.**  
**MIAMI FL 33156-6015** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

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 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

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:

**THOMAS NELLEN**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/12/02 (305) 662-7191**  
 Date Daytime Phone #

CR2E034 (4/02)

*Attachment*

675868  
Q38641

7/10/02

Columbus Construction of Dade County, Inc.  
10502 SW 77 Avenue  
Miami, FL 33156  
305-662-7191

EIN 59-22954065

I did not receive my 2002 UBR Filing Report this year.  
I only received the late notice.  
Please note that my mailing address has changed.

*Tom Nellen*  
Tom Nellen / President