

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State

05-23-2002 90025 011 ***150.00

DOCUMENT # H68131

1. Entity Name
BLUE JAY II CONSTRUCTION, INC.

Principal Place of Business

14233 SW 119TH AVENUE
MIAMI FL 33186
US

Mailing Address

14233 SW 119TH AVENUE
MIAMI FL 33186
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3260 NW 23 Ave.

Suite, Apt. #, etc. 1300E

City & State Pompano Beach, FL

Zip 33069 Country USA

3. Mailing Address

3260 NW 23 Ave

Suite, Apt. #, etc. # 1300E

City & State Pompano Beach, FL

Zip 33069 Country USA

4. FEI Number 59-2566334

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

VILLA, KENNETH
14233 SW 119TH AVENUE
MIAMI FL 33186

7. Name and Address of New Registered Agent

Name Kenneth Villa
Street Address (P.O. Box Number is Not Acceptable) 3260 NW 23 AVENUE
1300 E
City Pompano Beach FL Zip 33069

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 *K Villa*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/29/02

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, 2002 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

TITLE	P	<input type="checkbox"/> Delete
NAME	VILLA, KENNETH	
STREET ADDRESS	8350 S.W. 187TH STREET	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Kenneth Villa	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3260 NW 23 Avenue #1300E	
STREET ADDRESS	Pompano Beach, FL 33069	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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:

K Villa
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/29/02 - 954 984 4133

CR2034 (9/01)