(9/01)

FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 28, 2002 8:00 am K13694 DOCUMENT # **Secretary of State** 1. Entity Name 02-28-2002 90058 044 ***150.00 CONSTRUCTO BUILDING SERVICES, INC. Principal Place of Business Mailing Address 7975 NW 154TH ST 7975 NW 154TH ST UULUI SUITE 400 SUITE 400 HIALEAH FL 33016-5849 HIALEAH FL 33016-5849 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0029473 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent OSMAN, L. MICHAEL Street Address (P.O. Box Number is Not Acceptable) 1474-A WEST 84TH ST. HIALEAH FL 33016 City 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 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE Change ☐ Addition CARDOSO, DENNIS NAME NAME 7975 NW 154 ST STE 400 STREET ADDRESS STREET ADDRESS **MIAMI FL 33016** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition MIJARES, JOHN NAME NAME STREET ADDRESS 7975 NW 154TH ST #400 STREET ADDRESS CITY-ST-ZIP MIAMI LAKES FL 33016 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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. ennil De Cardoso Presiden

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF