

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 08, 2002 8:00 am**  
**Secretary of State**

**DOCUMENT # L74840**

1. Entity Name  
**ULTRA PLUMBING, INC.**

Principal Place of Business

10265 S.W. 70 ST.  
MIAMI FL 33173

Mailing Address

10265 S.W. 70 ST.  
MIAMI FL 33173

2. Principal Place of Business

10330 SW 16 ST

3. Mailing Address

10330 SW 16 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

65-0193872

Applied For

Not Applicable

Zip

33165

Country

U.S.A.

Zip

33165

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

PEREZ, PABLO

11821 S.W. 35TH ST.  
MIAMI FL 33175

7. Name and Address of New Registered Agent

Name

SUYAPA RIVERO

Street Address (P.O. Box Number is Not Acceptable)

10330 SW 16 ST

City

MIAMI

FL

Zip Code

33165

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

*Suyapa Rivero*

(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, 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 PD  
NAME PEREZ, PABLO  
STREET ADDRESS 11821 S.W. 35TH ST.  
CITY-ST-ZIP MIAMI FL 33175 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT  
NAME SUYAPA RIVERO ☒ Change ☐ Addition  
STREET ADDRESS 10330 SW 16 ST  
CITY-ST-ZIP MIAMI FL 33165

TITLE SECRETARY  
NAME SUYAPA RIVERO ☒ Change ☐ Addition  
STREET ADDRESS 10330 SW 16 ST  
CITY-ST-ZIP MIAMI FL 33165

TITLE SECRETARY  
NAME SUYAPA RIVERO ☒ Change ☐ Addition  
STREET ADDRESS 10330 SW 16 ST  
CITY-ST-ZIP MIAMI FL 33165

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

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

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: *Suyapa Rivero*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-26-02

Date

305 2205449

Daytime Phone #

0274092 AV

CR2E034 (9/01)