

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Apr 01, 2005 08:00 AM
Secretary of State

DOCUMENT # M60675

1. Entity Name
P.N.R. CONSTRUCTION, INC.



Principal Place of Business

**C/O P. NELSON RODRIGUEZ
10000 SOUTHWEST 56TH STREET, SUITE 32
MIAMI, FL 33165**

Mailing Address

**C/O P. NELSON RODRIGUEZ
10000 SOUTHWEST 56TH STREET, SUITE 32
MIAMI, FL 33165**



01282005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0057386

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**QUINTANA, LUIS J.
338 MINORCA AVENUE
CORAL GABLES, FL 33130**

**DO NOT WRITE
IN THIS SPACE**

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPT
RODRIGUEZ, P. NELSON
10000 SW 56TH ST #32
MIAMI, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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U00000283802
04/01/05-80041-013 158.75

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

P. Nelson Rodriguez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/14/05 (305) 545-8220
Date Daytime Phone #