

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 18, 2000 8:00 am**  
**Secretary of State**

04-18-2000 90190 007 \*\*\*\*61.25

**DOCUMENT #** N98000004516

1. Entity Name

MASTEC EMPLOYEES CHARITABLE FOUNDATION, INC.

Principal Place of Business

Mailing Address

3155 NW 77TH AVENUE 3155 NW 77TH AVENUE  
 MIAMI, FLORIDA 33122 MIAMI, FLORIDA 33122

2. Principal Place of Business

3. Mailing Address

3155 NW 77TH AVENUE 3155 NW 77TH AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

4. FEI Number

65-0861857

Applied For

Not Applicable

Zip

33122

Country

U.S.A.

Zip

33122

Country

U.S.A.

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ST. JOHN, GREGORY  
 2601 SOUTH BAYSHORE DRIVE  
 SUITE 1600  
 MIAMI, FLORIDA 33133

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEES \$81.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

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

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

TITLE C ☒ Delete  
 NAME LEONARD MONSERRAT  
 STREET ADDRESS 3155 NW 77TH AVENUE  
 CITY - ST - ZIP MIAMI, FLORIDA 33122

TITLE S/D ☐ Delete  
 NAME CHRISTY MANGIO  
 STREET ADDRESS 3155 NW 77TH AVENUE  
 CITY - ST - ZIP MIAMI, FLORIDA 33122

TITLE T/D ☐ Delete  
 NAME HECTOR VERGARA  
 STREET ADDRESS 3155 NW 77TH AVENUE  
 CITY - ST - ZIP MIAMI, FLORIDA 33122

TITLE D ☐ Delete  
 NAME RALPH HERNANDEZ  
 STREET ADDRESS 3155 NW 77TH AVENUE  
 CITY - ST - ZIP MIAMI, FLORIDA 33122

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

TITLE ☐ Change ☐ Addition

NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

TITLE ☐ Change ☐ Addition

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TITLE ☐ Change ☐ Addition

NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, 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:**

*Hector J. Vergara*, HECTOR J. VERGARA

03/31/00 (305) 599-1800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #