P00000004619

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 08, 2002 8:00 am
Secretary of State
05-24-2002 91328 041 ***150.00

DOCUMENT # P00000004619

1. Entity Name
DESIGN AND PLANNING CONSULTANTS, INC

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
21 S.W. 33 AVENUE	3845 S.W. 1ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI, FL	City & State: MIAMI, FL
Zip: 33135 Country:	Zip: 33134 Country:

4. FEI Number: 59-3628660 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. **Name and Address of Current Registered Agent**

Name: ALFREDO SANCHEZ
Street Address (P.O. Box Number is Not Acceptable): 5200 SW 8 ST.
City: MIAMI FL Zip Code: 33134

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	PRESIDENT
NAME	FACUNDO DE LA ROZA
STREET ADDRESS	3845 S.W. 1ST
CITY-ST-ZIP	MIAMI, FL 33134
TITLE	VICE PRESIDENT
NAME	RITA CECILIA PUENTES
STREET ADDRESS	21 SW 33 AVE
CITY-ST-ZIP	MIAMI, FL 33134
TITLE	SECRETARY
NAME	ADRIANA C. PUENTES
STREET ADDRESS	21 SW 33 AVE
CITY-ST-ZIP	MIAMI, FL 33134
TITLE	TREASURER
NAME	LORENZO A. PUENTES
STREET ADDRESS	21 SW 33 AVE
CITY-ST-ZIP	MIAMI, FL 33134
TITLE	
NAME	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

CR2E034B (12/01)

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 on an attachment with an address with all other like empowered.

SIGNATURE: Facundo de la Roza 6/20/02 305-447-0074
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

5/24/2002-91328-041-$150.00-$150.00

Attachment

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #P00000046019

1. Entity Name
DESIGN & PLANNING CONSULTANTS, INC.

DO NOT WRITE IN THIS SPACE

967166

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
21 SW 33 AVE	3845 SW 1ST
Suite, Apt. #, etc.	Suite, Apt. #, etc
	MIAMI, FL
City & State: MIAMI, FL	City & State
Zip: 33135 Country	Zip: 33134 Country

4. FEI Number: 59-3628660

5. Certificate of Status Desired ☐ $8.75 Add'l Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: SANCHEZ, ALFREDO

Street Address (P.O. Box Number is Not Acceptable): 5200 SW 8TH STREET

City: CORAL GABLES FL 33

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 Add'l

11. OFFICERS AND DIRECTORS

TITLE	
NAME	DE LA ROZA, FACUNDO
STREET ADDRESS	3845 SW 1ST
CITY-ST-ZIP	MIAMI, FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

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SIGNATURE: Facundo de la Roza 4/30/02 305-447-
SIGNATURE AND TYPED OR PRINTED NAME OF ADDING OFFICER OR DIRECTOR Date Daytime Phone