

# 2002

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**
**FILED**  
**Mar 19, 2002 8:00 am**  
**Secretary of State**

03-19-2002 90014 048 \*\*\*150.00

DOCUMENT # P00000025192

1. Entity Name

Lucram Block Construction, Inc.

**DO NOT WRITE IN THIS SPACE**

425499

2. Principal Place of Business

795 W. 74th Pl.

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City &amp; State

Hialeah, FL

City &amp; State

4. FEI Number

65-1006463

Applied For

Not Applicable

Zip

33014

Country

Dade

Zip

Country

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

7. Name and Address of Current Registered Agent

Name

Lucia O. Rodriguez

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

795 W. 74th Place

City

Hialeah

FL

Zip 33014

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

2/2/02

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

NAME

STREET ADDRESS

CITY - ST - ZIP

President  
 Lucia O. Rodriguez  
 795 W. 74th Place  
 Hialeah, FL 33014

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Secretary  
 Roman Lozano  
 795 W. 74th Place  
 Hialeah, FL 33014

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

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Hialeah, FL 33014

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13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with or without like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

Date

Daytime Phone #

2/2/02 (786) 229-7839

CR2E034B (12/01)