FILED
Feb 24, 2003 8:00 am
Secretary of State
02-24-2003 90963 013 ***150.00

2003 FOR PROFIT CORPORATION / UNIFORM BUSINESS REPORT (UBR)

80039923

DOCUMENT # P00000025192

1. Entity Name
LUCROM BLOCK CONSTRUCTION, INC.

Principal Place of Business
~~795 WEST 74 PLACE~~
~~HIALEAH, FL 33014~~

Mailing Address
~~795 WEST 74 PLACE~~
~~HIALEAH, FL 33014~~

2. Principal Place of Business: 8886 NW 171 Lane
Suite, Apt. #, etc.
City & State: Miami
Zip: Florida Country: Dade

3. Mailing Address: 8886 N.W. 171 Lane
Suite, Apt. #, etc.
City & State: Miami
Zip: 33018 Country: Dade

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-1006463 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
RODRIGUEZ, LUCIA O
795 WEST 74 PLACE
HIALEAH, FL 33014

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable): 8886 N.W. 171 Lane
City: Miami FL Zip Code: 33018

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, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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	PD RODRIGUEZ, LUCIA O 795 WEST 74 PLACE HIALEAH, FL 33014	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD LOZANO, ROMAN 795 WEST 74 PLACE HIALEAH, FL 33014	☐ 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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
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

CR2E034 (10/02)

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: [signature] 2/18/03 (786) 229-7839
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #