2001 UNIFORM BUS		KI (UBI	K) #	APP,	'ROVE'n		
DOCUMENT # P00000028258  1. Entity Name				AND THE			
GENERAL CONTRACTORS-SUB, INC.				01 NOV -2 PM 12: 08			
incipal Place of Business							
6909 North Bay Road #7.17/ unny Isles Beach, FL 33160	16909 North Sunny Isles			SECRETARY TALLAHASSE	OF STATE E. FLORIDA		
Principal Place of Business 2100 W 76th Street:  3. Mailing Address 2100 W. 76th		Street		P		litë	
Suite, Apt. #, etc. Suite, Apt. #, etc. 212			3	/13/n/ DO NOT WBL	TE IN THIS SPACE	12 H/S	
City & State	City & State		ì	El Number	<u> </u>		
Hialeah, FL Zip Country	Hialeah, FL	Country		5-0992278	\$9.75	ot Applicable	
33016, USA	33016	USA		Certificate of Status Desired	Fee Require		
6. Name and Address of Curren	t Registered Agent	Name	7. N	ame and Address of New R	legistered Agent		
RODRIGUEZ, JUAN P. 16909 North Bay Road, Suite 717			Street Address (P.O. Box Number is Not Acceptable)				
Sunset Isles Beach, FL 33							
	•	City			FL Zip Cod	le	
This corporation is eligible to satisfy its Intangib Tax filing requirement and elects to do so.  (See criteria on back)	After MAY 1, 200 Make Check Payabl	le to Department	50.00 t of State	10. Election Campaign Fir	n. 🗌 Added	May Be d to Fees	
I. OFFICERS AN	D DIRECTORS  Delete	12.	VPSD	DITIONS/CHANGES TO OFF	·		
RODRIGUEZ, JUAN P. 16909 North Bay Ro TY-ST-ZIP Sunny Isles Beach	oad, Suite 717	NAME STREET ADDRESS CITY-ST-ZIP	MIRANDA 16075 N	, ALEJANDROC. W 45TH AVE. KA, FL 33054	Onlings	Addition Addition	
LE ME REET ADDRESS Y-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition	
LE ME REET ADDRESS 'Y-ST-ZIP	☐ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
LE ME HEET ADDRESS Y-ST-ZIP	_ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		☐ Change	☐ Addition .	
LE Me Heet address Y-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
.E . AE . BET ADDRESS Y-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
<ol> <li>I hereby certify that the information supplied wi indicated on this report or supplemental report of the corporation or the receiver or trustee emp changed, or on an attachment with an address</li> <li>SIGNATURE:</li> </ol>	is true and accurate and that me powered to execute this report a , with all other like empowered.	ny signature shall ha	ave the same le pter 607, Florid	egal effect as if made under of la Statutes; and that my name	oath; that I am an officer	or director r Block 12 if	

WILLIAM A. CHIARA, JR. ATTORNEY AND COUNSELLOR AT LAW

4701 WEST 4TH AVENUE HIALEAH, FLORIDA 33012 PHONE: (305) 557-2577 FAX: (305) 825-3876

October 24, 2001

DIVSION OF CORPORATIONS P.O.BOX 6327 TALLAHASSEE, FL 33214

RE: GENERAL CONTRACTORS-SUB, INC.

To whom it may concern:

Enclosed please find Amended Uniform Business Report on the above mentioned corporation.  $% \left( \frac{1}{2}\right) =\frac{1}{2}\left( \frac{1}{2}\right) ^{2}$ 

I have been advised by your office that the General Contractors-Sub, Inc. has a credit with your office in the amount of \$150.00. Kindly charge the \$61.25 filing fee for this amended report to the \$150.00 credit.

Very truly yours, ?

1///

WAC/dc

Enclosure

3/13/01 90072 012 #150.00