

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90365 038 ***150.00

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DOCUMENT # P00000073769

1. Entity Name

BLUE CONSTRUCTION GROUP, CORP.



Principal Place of Business

**835 SALZEDO ST
CORAL GABLES FL 33134**

Mailing Address

**835 SALZEDO ST
CORAL GABLES FL 33134**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

12005 N.E. 7TH AVENUE

Suite, Apt. #, etc.

12005 N.E. 7TH AVE

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33161

Country

U.S.

Zip

33161

Country

U.S.

4. FEI Number

65-1032509

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**ISTURIZ, JAVIER J
835 SALZEDO ST
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name

ISTURIZ, JAVIER J.

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

12005 N.E. 7TH AVE

City

MIAMI

FL

Zip Code

33161

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

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

Javier J. Isturiz
(NOTE: Registered Agent signature required when reinstating)

4/28/03
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 **D** ☐ Delete
NAME **ISTURIZ, JAVIER J**
STREET ADDRESS **835 SALZEDO ST**
CITY-ST-ZIP **CORAL GABLES FL 33134**

TITLE **T** ☐ Delete
NAME **DE DEMAS, KIMBERLY**
STREET ADDRESS **835 SALZEDO ST**
CITY-ST-ZIP **CORAL GABLES FL 33134**

TITLE **S** ☐ Delete
NAME **NIESSEN, WILLIAM**
STREET ADDRESS **536 14TH ST #307**
CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **ISTURIZ, JAVIER J**
STREET ADDRESS **12005 N.E. 7TH AVE**
CITY-ST-ZIP **MIAMI, FL. 33161**

TITLE **T** ☒ Change ☐ Addition
NAME **ISTURIZ, KIMBERLY**
STREET ADDRESS **12005 N.E. 7TH AVE**
CITY-ST-ZIP **MIAMI, FL. 33161**

TITLE **S** ☒ Change ☐ Addition
NAME **NIESSEN, WILLIAM**
STREET ADDRESS **#926 MICHIGAN AVE**
CITY-ST-ZIP **MIAMI BEACH, FL. 33139**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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)(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:

Javier J. Isturiz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/03
Date

305-519-1411
Daytime Phone #

CR2E034 (10/02)