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2001 UNIFORM BUSINESS REPORT (UBR)

Mar 19, 2001 8:00 am Ю́О́СШМЕНТ # P00000108479 Secretary of State 1. Entity Name 02-15-2001 90022 001 ***150.00 F & J CONSTRUCTION CORP. 03-19-2001 90026 030 ***875.00 Principal Place of Business Mailing Address 1441 NORTHWEST 115 STREET 1441 NORTHWEST 115 STREET LUUJZUIL MIAMI FL 33167 MIAMI FL 33167 2. Principal Place of Business 3. Mailing Address Sulte. Apt. #, etc. Sulte, Apl. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1057010 Not Applicable Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JIMENEZ-FERNANDO -Street Address (P.O. Box Number is Not Acceptable) 1441 NORTHWEST 115 STREET MIAMI FL 33167 Zip Code City 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. (NOTE: Registered Agent eignature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible \$5.00 May Bo 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (Seè criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11, 12 Change ☐ Addition TOD F TITLE ☐ Detete NAME JIMENEZ, FERNANDO NAME STREET ADORESS STREET ADDRESS 1441 NORTHWEST 115 STREET CITY-ST-ZIP CITY-ST-ZP MIAMI FL 33167 .tm F ☐ Change ☐ Addition TITLE Delete VP. NAME NAME MEDINA, EVELYN STREET ADDRESS STREET ADDRESS 1441 NORTHWEST 115 STREET CITY-\$1-2P DITY-ST-ZE MIAMI FL 33167 TITLE Delete TITLE Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS C/TY-ST-20P CTTY-ST-20P Addition TITLE _ 🗐 Chambi TITLÉ. Distance of the last of the la NAME NAME STREET ACCURESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TILE ☐ Detete nn c Chance ☐ Addition HAVE HAR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ันที่ ราะสะ Change Addition TILE ☐ Detera TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CUTY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 early, 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.