

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 92207 045 ***150.00

0231706 AV

DOCUMENT # P01000003062

1. Entity Name

ARIES CONSTRUCTION SERVICES OF MIAMI, INC.



Principal Place of Business
1306 SOUTH DOUGLAS ROAD #2
CORAL SPRINGS FL 33134

Mailing Address
1306 SOUTH DOUGLAS ROAD #2
CORAL SPRINGS FL 33134



2. Principal Place of Business

655 S.W. 19th Road

3. Mailing Address

655 S.W. 19th Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-1069730

Applied For

Not Applicable

Zip

33129

Country

USA

Zip

33129

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAVELO, MYRA
921 S.W. 128TH COURT
MIAMI FL 33184

Name

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

City

FL

Zip Code

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

Myra Ravelo

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

(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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **RODRIGUEZ, JUAN C**
CITY-ST-ZIP **1306 SOUTH DOUGLAS ROAD #2**
CORAL GABLES FL 33134

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **655 S.W. 19th Road**
CITY-ST-ZIP **Miami, FL 33129**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **RODRIGUEZ, ANITA A**
CITY-ST-ZIP **1306 SOUTH DOUGLAS ROAD #2**
CORAL GABLES FL 33134

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **Rodriguez, Anita A.**
CITY-ST-ZIP **655 S.W. 19th Road**
Miami, FL 33129

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

Antia A. Rodriguez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Antia A. Rodriguez **4/28/03**

Date

(786) 286-8793

Daytime Phone #

CR2E034 (10/02)