

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90670 040 ***158.75

DOCUMENT # P01000027460

1. Entity Name
SOLARSCAPE STUDY CONSTRUCTION & SUPPLY, INC.

Principal Place of Business

9255 SW 125 AVE
UNIT 203 R
MIAMI FL 33186

Mailing Address

9255 SW 125 AVE
UNIT 203 R
MIAMI FL 33186



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9255 SW 125 Av

Suite, Apt. #, etc.

Unit 203 R

City & State

MIAMI FL

Zip

33186

Country

3. Mailing Address

9255 SW 125 Av

Suite, Apt. #, etc.

Unit 203 R

City & State

MIAMI FL

Zip

33186

Country

4. FEI Number

05-1099154

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALVARENGA, ASDRUBAL D
4472 NW 74TH AVE.
MIAMI FL 33166

Name

MARIA H GARCIA

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

9255 SW 125 Av Unit 203 R

City

MIAMI

FL

Zip Code
33186

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **DIRECTOR** ☐ Delete
NAME **WENCES LAUZ**
STREET ADDRESS **9255 SW 125 Av. Unit 203 R.**
CITY-ST-ZIP **MIAMI FL. 33186**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DIRECTOR.** ☐ Change ☒ Addition
NAME **EDGAR O. RODRIGUEZ-FUENTES**
STREET ADDRESS **9255 SW 125 Av UNIT. 203 R.**
CITY-ST-ZIP **MIAMI FL. 33186**

TITLE **DIRECTOR.** ☐ Change ☒ Addition
NAME **EDGAR O. RODRIGUEZ-LEON.**
STREET ADDRESS **9255 SW 125 Av. UNIT. 203 R**
CITY-ST-ZIP **MIAMI FL. 33186**

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

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or Block 12 if changed, or on an attachment with an address, with any other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/23/02 (305) 2755943
 Date Daytime Phone #

CR2E034 (9/01)