FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State
05-24-2002 91351 046 ***150.00

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DOCUMENT # P01000033350

1. Entity Name
Dan Deco Construction Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
6538 Collins Ave	6538 Collins
Suite, Apt. #, etc. #211	Suite, Apt. #, etc. #211
City & State Miami Bch, FL	City & State Miami Bch, FL
Zip 33141 Country USA	Zip 33141 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number — Applied For / ~~Not Applicable~~

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Daniel Cruz

Street Address (P.O. Box Number is Not Acceptable): 6538 Collins Ave #211

Miami

City: Miami Bch FL Zip Code: 33141

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: X _____ X _____ DATE
Signature, typed or printed name of registered agent, and title if applicable. NOTE: Registered Agent signature required when reinstating.

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

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	President
NAME	Daniel Cruz
STREET ADDRESS	6538 Collins Ave
CITY-ST-ZIP	Miami Bch, FL 33141
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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NAME	
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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: X _____ X Daniel Cruz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #