

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

8/

FILED
Sep 08, 2003 8:00 am
Secretary of State

08-18-2003 90172 046 ***150.00

DOCUMENT # P01000065263

1. Entity Name

MURILLO CONSTRUCTION, INC



DO NOT WRITE IN THIS SPACE

55055874

2. Principal Place of Business
420 25TH STREET SW

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
NAPLES, FL

City & State

4. FEI Number 59-3726841

Applied For
Not Applicable

Zip
34117

Country

Zip

Country

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

7. Name and Address of Current Registered Agent

Name **DIAN EDWARDS**

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

1852 B 40TH TERR SW

City **NAPLES, FL**

Zip Code **34116**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when renewing)

DATE

January 1 - May 1 Fee is \$100.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

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 NAME STREET ADDRESS CITY-ST-ZIP	MURILLO, PABLO (PRESIDENT) 420 25TH ST. SW NAPLES, FL 34117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MURILLO, MARGARITA V. PRESIDENT 420 25TH ST SW NAPLES, FL 34117
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IN THIS SPACE**

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 on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment

55055874

#PO1600015263

ALPHA ACCOUNTING SERVICES, INC.

1852 B 40TH TERRACE SW

NAPLES, FL. 34116

TEL: 239-455-3047, FAX: 239-455-5133

August 12, 2003

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILING
P O BOX 1500
TALLAHASSEE, FL 32302-1500

Dear Sir/Madam

RE: MURRILLO CONSTRUCTION, INC- 420 25TH ST SW. NAPLES, FL 34117

This letter is to notify you that this Corporation did not receive a renewal notice of the original form in January 2003. Therefore, we have downloaded a copy of the renewal form from the Internet on behalf of our client, for submission.

Yours truly,



DIAN EDWARDS
PRESIDENT