

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000076202

1. Entity Name

FUTURE FLORIDA BUILDERS, INC.

Principal Place of Business

Mailing Address

2. Principal Place of Business

9340 NW 35TH. CT.

Suite, Apt. #, etc.

3. Mailing Address

9340 NW 35TH. CT.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-1127691

Applied For

Not Applicable

Zip

33147

Country

MIAMI-DADE

Zip

33147

Country

MIAMI-DADE

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

Name

CARLOS J. RODRIGUEZ

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

9340 NW 35TH. CT.

City

MIAMI

FL

Zip Code

33147

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

05/07/2002

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 \$650.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

P/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
RODRIGUEZ, CARLOS J.
9340 NW 35TH. CT
MIAMI, FL 33147

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

S/T/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
CRUZ, LOURDES A
9340 NW 35TH. CT
MIAMI, FL 33147

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
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☐ 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)(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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CARLOS J. RODRIGUEZ, PRE. 05/07/02 (305) 693-5010

Date

Daytime Phone #

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91343 011 ***150.00

669140

DO NOT WRITE IN THIS SPACE