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

DOCUMENT # P01000094202 1. Entity Name 102 AUG -1 AM 10: 49 J & M CONSTRUCTION SVCE. LINC. SEGRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 15202 SW 141 ST 15202 SW 141 ST Stiffe. Apt. ≠. etc. Surie, Apr. #, utc. DO NOT WRITE IN THIS SPACE MÎĂMÎ, FL MIAMI. Applied For Not Applicable 33196 Country 33796 Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE CORONADO, NESTOR Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 7360 CORAL WAY STE 21 MIAMI 8. The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. INDIE Had water what square toqued when managing usry 1 - May 1 Fee in \$150,00 (Ner May 1 Fee is \$550,00 Amended UBN is \$61.25 9. This corporation is digible to satisfy its Intengible Tax Illing requirement and elects to up so. 10. Election Campaign Financing \$5.00 May Be (See criteria on back) Trust Fund Contribution. eyable to Department of S 11. OFFICERS AND DIRECTORS PSD.... FITLE LOPEZ, MARBIN A 500007116435--9 NAME NAME STREET ADDRESS 15202 SW 141 STREET -08/14/02--01080--007 STREET ADDRESS CITY-ST-7IP MIAMI, FL 33196 \*\*\*\*150.00 \*\*\*#150.00 CIEY: SI- BP IITLE Tir. VASQUEZ, SANDRA M 15202 SW 141 STREET MIAMI, FL 33196 MILE STREET ADDRESS STREET ADDRESS CITY, \$1-20 CITY-ST-ZP FITLE 1111. NAME HALE STREET ANDRESS STITE T ADDRESS CITY-ST-2:P DO NOT WRITE CITY-ST-DR THILE TITLE IN THIS SPACE MANG STREET ADDRESS STREET ADDRESS CITY ST-ZIZ COY. ST. ME OTLE

13. Thereby ceruly that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information of this report of suppliemental report is true and accurate and that my signature shall have the same legal affect as if made under outlit that I am an officer or director of the corporation of the recovery pustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 13 or on an anaddress, with all other like empowered.

NAME

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STATET ADDRESS

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SIGNATURE:

NAME:

Title

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## J & M CONSTRUCTION SVCE, INC. DOC. # P01000094202



TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED ANY CORRESPONDENCE FROM YOUR OFFICE. THIS IS MY FIRST YEAR PAYING THE UBR AND MY ADDRESS HAS NEVER CHANGE I REALLY DON'T KNOW WHY I DID NOT GET THE UBR FORM. PLEASE WAIVE THE FEES AND PUT THE ABOVE METIONED IN ITS CURRENT STATUS.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

**CORDIALLY** 

**PRESIDENT**