

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

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90053 028 ***150.00

DOCUMENT # P01000098766

1. Entity Name

Arilez Construction, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1931 N.E. 51 STREET

Suite, Apt. #, etc.

Apt. # 3

City & State

Ft. Lauderdale, FL

Zip

33308

Country

USA

3. Mailing Address

1931 N.E. 51 STREET

Suite, Apt. #, etc.

Apt. # 3

City & State

Ft. Lauderdale, FL

Zip

33308

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1143534

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Eduardo Roman

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

1931 N.E. 51 STREET

Apt. # 3

City

Ft. Lauderdale

FL

Zip Code

33308

**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.

SIGNATURE Eduardo Roman

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

(NOTE: Registered Agent signature required when reinstating)

4/30/02

DATE

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
NAME
STREET ADDRESS
CITY - ST - ZIP
P
Eduardo Roman
1931 N.E. 51 STREET
Ft. Lauderdale, FL 33308

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
Wilberto Moya
101 SE 9 Ave. #1
Pompano Beach, FL 33060

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

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: Eduardo Roman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/02

Date

Daytime Phone #

CR2E034B (12/01)