

# 2002 UNIFORM BUSINESS REPORT (UBR)

07-10-2002 90195 034 \*\*\*150.00

FILED P01000098792

02 AUG 12 AM 11:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

**DOCUMENT # P01000098792**

**1. Entity Name**  
SAN JOSE CONSTRUCTION, CORP.

**Principal Place of Business**  
16443 SW 97TH TERRACE  
MIAMI FL 33196

**Mailing Address**  
16443 SW 97TH TERRACE  
MIAMI FL 33196

**2. Principal Place of Business**  
1000 LENOX AVE #12A

**3. Mailing Address**  
Suite, Apt. #, etc.  
12-A

**City & State**  
MIAMI BEACH FL

**City & State**  
City & State

**Zip**  
33139

**Country**  
USA

**Zip**  
Zip

**Country**  
Country

**4. FEI Number**  
05-1155261

**Applied For**  
Not Applicable

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

**6. Name and Address of Current Registered Agent**  
AVALOS, JOSE L  
16443 SW 97TH TERRACE  
MIAMI FL 33196

**7. Name and Address of New Registered Agent**  
Name  
AVALOS, JOSE L  
Street Address (P.O. Box Number is Not Acceptable)  
1000 LENOX AVE #12A  
City  
MIAMI BEACH FL Zip Code  
33139

**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]* **DATE** 7-8-02

Signature typed or printed name of registered agent and (use 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.** ☐ **FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750.00 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**

<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> AVALOS, JOSE L 16443 SW 97TH TERRACE MIAMI FL 33196	<input type="checkbox"/> Delete
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>1000 LENOX AVE #12A MIAMI BEACH, FL 33139</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

**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]* 7-8-02 (205) 695-0413

CR2E034 (4/02)

**SAN JOSE CONSTRUCTION, INC**

1000 Lenox Avenue  
Suite 12-A  
Miami Beach, FL 33139  
Telephone (305) 695-0463

Attachment  
DHP0000098792  
B0128416

2003

Miami, July 8, 2002

Department of State  
Division of Corporations  
Tallahassee, FL 32314

**RE: P01000098792**

To Whom It May Concern:

Relating to the Certificate of Administrative Dissolution or Revocation of the Corporation of SAN JOSE CONSTRUCTION, CORP, I would explain the following:

1. The corporation was open on the month of October of 2001, it has been 9 months since and now it has been closed.
2. I never received any notification form the department of state regarding to the annual fee of \$150.00 to renovate the corporation for the year of 2001. This could be proven with the attached document from the US Postal Service on which the changed address from the corporation is shown:

Old Address: 16443 SW 97 TERRACE  
Miami, FL 33196

Old Address: 420 Lincoln Road #387  
Miami Beach, FL 33139

New Address: 1000 Lenox Avenue #12-A  
Miami Beach, FL 33139

**SAN JOSE CONSTRUCTION, INC**

**1000 Lenox Avenue**

**Suite 12-A**

**Miami Beach, FL 33139**

**Telephone (305) 695-0463**

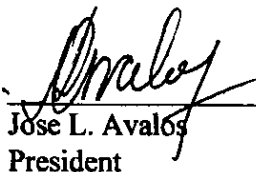
Attachment  
DL# P01000090192  
B028416

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3. The economic situation from the corporation is a disaster; it is beginning to work under the normal activities and is handled by only one person. I am the owner, salesperson, employee, stocker, secretary, messenger etc... which under this circumstances I am not able to have another job; the only main purpose for me to continue with the corporation is to improve it and make it succeed.

With this proofs and my economic situation, I would like to ask for the permission on the payment of 550.00 and accept the payment of 150.00 the one that was the initial and real payment that should have been made.

I will appreciate you attention,

  
\_\_\_\_\_  
Jose L. Avalos  
President