

2002 UNIFORM BUSINESS REPORT (UBR)

0062240 AV

DOCUMENT # P01000103240

1. Entity Name
REEF CONSTRUCTION MANAGEMENT & SERVICES, CORP.

FILED

02 DEC -5 PM 1:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
9092 SW 215 TERR
MIAMI FL 33189

(CHANGE)
TO ↓

Mailing Address
9092 SW 215 TERR
MIAMI FL 33189

(CHANGE)
TO ↓



2. Principal Place of Business
4970 SW 72 AVE
Suite, Apt. #, etc.
Suite 100
City & State
MIAMI - FLORIDA
Zip
33155
Country

3. Mailing Address
P.O. BOX # 970967
Suite, Apt. #, etc.
City & State
MIAMI - FLORIDA
Zip
33197
Country

REINSTATEMENT 02
DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1149187
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
SEIFERT, RICARDO H
9901 SW 165 TERR
MIAMI, FL 33157
(CHANGE)

7. Name and Address of New Registered Agent
Name
SEIFERT, RICARDO H
Street Address (P.O. Box Number is Not Acceptable)
24987 SW 128 CT - DISCAYNE RUN
City
HOMESTEAD FL Zip Code
33032

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 11/08/02
(NOTE: Registered Agent signature required when reinstating)

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 \$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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SEIFERT, RICARDO H 9901 SW 165 TERR MIAMI FL 33157 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS WELCH, RONALD S 9092 SW 215 TERR MIAMI FL 33189 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SEIFERT, RICARDO H 24987 SW 128 CT - DISCAYNE RUN HOMESTEAD, FL 33032 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	800008972098 12/05/02--01005--001 **\$600.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	800008972098 11/13/02--01069--002 **\$150.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE 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 to this report, with all other like empowered.

SIGNATURE: 11/08/02 (786)258-2559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)