

FILED
Jun 10, 2002 8:00 am
Secretary of State

05-02-2002 90120 047 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000106063

1. Entity Name

Triple H Concrete & Carpentry, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1145 738 E. CR.

Suite, Apt. #, etc.

3. Mailing Address

1145 738 E. CR.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Webster Florida

Webster Florida

4. FEI Number

690004581

Applied For

Not Applicable

Zip

33597

Country

USA

Zip

33597

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name: Raymundo Herrera

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

1145 738 E. CR.

City: Webster

FL

Zip Code

33597

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

Raymundo Herrera

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

(NO ILL. Registered Agent signature required when reappointing)

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: PT3
 NAME: Raymundo Herrera
 STREET ADDRESS: 1145 738 East C.R.
 CITY - ST - ZIP: Webster, Florida 33597

TITLE
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Raymundo Herrera

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

4/23/02

Daytime Phone #

CR2E034B (12/01)