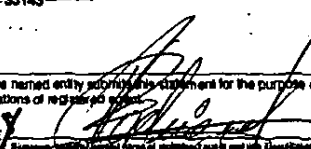


FILED
May 27, 2003 8:00 am
Secretary of State

04-30-2003 90148 019 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000001885		
1. Entity Name BERLING RODRIGUEZ MASONRY, INC.		
Principal Place of Business 1485 WEST 46TH STREET #303 MIAMI, FL 33142		Mailing Address 1485 WEST 46TH STREET #303 MIAMI, FL 33142
2. Principal Place of Business 2967 NW 59 ST.		3. Mailing Address 2967 NW 59 ST.
City & State MIAMI, FL		City & State MIAMI, FL
Zip 33142		Country USA
4. FEI Number 01-0583201		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent GALLINAR, PEDRO M 6701 SUNSET DRIVE SUITE 100 MIAMI, FL 33143		7. Name and Address of New Registered Agent FEDERICO RODRIGUEZ 2967 NW 59 ST. MIAMI, FL 33142
8. The above named entity subscribes to 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 		DATE 4/29/03
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS		
TITLE PD	NAME RODRIGUEZ, FEDERICO	☐ Delete
STREET ADDRESS 2967 NW 59 STREET		
CITY-STATE-ZIP MIAMI, FL 33142		
TITLE VPD	NAME RODRIGUEZ, ELBA	☐ Delete
STREET ADDRESS 2967 NW 59 STREET		
CITY-STATE-ZIP MIAMI, FL 33142		
TITLE 	NAME 	☐ Delete
STREET ADDRESS 		
CITY-STATE-ZIP 		
TITLE 	NAME 	☐ Delete
STREET ADDRESS 		
CITY-STATE-ZIP 		
TITLE 	NAME 	☐ Delete
STREET ADDRESS 		
CITY-STATE-ZIP 		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE 	NAME 	☐ Change ☐ Addition
STREET ADDRESS 		
CITY-STATE-ZIP 		
TITLE 	NAME 	☐ Change ☐ Addition
STREET ADDRESS 		
CITY-STATE-ZIP 		
TITLE 	NAME 	☐ Change ☐ Addition
STREET ADDRESS 		
CITY-STATE-ZIP 		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 139.07(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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: 6/89 F 4842 V.P.		4/29/03 305-638-5952

55044070



CHECK HERE IF MAKING CHANGES

CR2004 (10/02)