FILED
Apr 21, 2003 8:00 am
Secretary of State

04-07-2003 90721 032 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

4/7/

DOCUMENT # P02000020006

1. Entity Name
GUSMEN CONSTRUCTION, CORP.

Principal Place of Business	Mailing Address
6761 PERSHING ST HOLLYWOOD FL 33024	6761 PERSHING ST HOLLYWOOD FL 33024

2. Principal Place of Business		3. Mailing Address	
6100 Dewey ST		6100 Dewey ST	
Suite, Apt. #, etc. Hollywood		Suite, Apt. #, etc. Hollywood	
City & State FL		City & State Hollywood FL	
Zip 33023	Country	Zip 33023	Country

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number 01-0630041 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MARTINEZ, GUSTAVO 6761 PERSHING ST HOLLYWOOD FL 33024	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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]
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ, GUSTAVO 6761 PERSHING ST HOLLYWOOD FL 33024	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MENDEZ, JUAN 6761 PERSHING ST HOLLYWOOD FL 33024	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
Gustavo Martinez

attachment 58027931
#P02000020006

Florida Department of State

Reference Number P02000020006

My Federal Employer Identification is
01-0630041

Thanks

Gusmen Construction Corp.