

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90011 018 ***158.75

DOCUMENT # P02000030522

1. Entity Name
GREEN PINE CONSTRUCTION INC.



Principal Place of Business
1135 BERT RD
SUITE H-7
JACKSONVILLE, FL 32211

Mailing Address
1135 BERT RD
SUITE H-7
JACKSONVILLE, FL 32211

54036883



2. Principal Place of Business
1135 BERT RD

3. Mailing Address
1135 BERT RD

Suite, Apt. #, etc.
SUITE H3

Suite, Apt. #, etc.
SUITE H3

City & State
JAX. FL

City & State
JAX FL

02282004 Chg-P CR2E034 (10/03)

4. FEI Number
03-0417018

Applied For
Not Applicable

Zip Country
32211 FL

Zip Country
32211 FL

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

MEJIA, JORGE A
1135 BERT RD
SUITE H-7
JACKSONVILLE, FL 32211

Name

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

1135 BERT RD SUITE H-3

City JACKSONVILLE

FL

Zip Code 32211

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

04/19/04

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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 P
NAME MEJIA, JORGE A
STREET ADDRESS 1135 BERT RD APT H-7
CITY-ST-ZIP JACKSONVILLE, FL 32211 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME MEJIA, JAIME A
STREET ADDRESS 1135 BERT RD APT H-7
CITY-ST-ZIP JACKSONVILLE, FL 32211 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME VILLEGAS, MARTIN
STREET ADDRESS 1135 BERT RD
CITY-ST-ZIP JACKSONVILLE, FL 32211 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AS
NAME QUIROS, MARVIN
STREET ADDRESS 1135 BERT RD
CITY-ST-ZIP JACKSONVILLE, FL 32211 ☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/04

Date

Daytime Phone #

904-626-1419