2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

Principal Place of Business

SIGNATURE:

P02000056253

Mailing Address

1900 E. ROBINSON STREET

1. Entity Name **R&G CONSTRUCTION & ENTERPRISES, INC.**



FILED Mar 12, 2003 8:00 am Secretary of State

03-12-2003 90133 035 ***158.75

1900 E. ROBIN ORLANDO FL		r		e. Robinson Stre NDO FL 32803	ET				
2. Principal Place of Business			3. Mailing Address						188 1111 1881
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES		
City & State			City	& State		4.	FEI Number 01-0701362		lied For Applicable
Zip	Country			· · · · · · · · · · · · · · · · · · ·	Country	stry 5. Certificate of Status Desired \$8.75 Additive Fee Required		ional	
6. Name and Address of Current Re				d Agent		7. Name and Address of New Registered Agent			
V. Tullivania radio						Name			
SPENCER,	STEVEN	A			Stroot Ac	Street Address (P.O. Box Number is Not Acceptable)			
1900 E. R					Sileet Ad	Officer Addition (1.0) Box (1.0)			
ORLANDO									
OHENDO	1 6 02000	•					FL	Zip Code	
		Les Maries			City		<u> </u>		
8. The above the obligati	named entit ons of regis	y submits this statement tered agent.	for the purp	ose of changing its	registered office or	registered as	gent, or both, in the State of Florida. I am fa	ımiliar with, a	nd accept
SIGNATURE -	Signature, typed	f or printed name of registered age	ent and title if app	olicable. (NOT	E: Registered Agent signatu	re 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.	Added	May Be to Fees
10.		OFFICERS AN		DRS	11.	A	ADDITIONS/CHANGES TO OFFICERS AND		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	25335 M	S, RICHÁRD ARDON CIRCLE FL 32767	٠	□ 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	1		☐ Change	Addition
				Delete	TITLE			Change —	Addition~
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12. I hereby indicated	d on this rep	he information supplied ort or supplemental repo the receiver or trastee ttachment with an addi-	rt is true and	g does not qualify f d accurate and that dexecute this repo ther like empowere	rt as required by Cha	ted in Sectionave the sam apter 607, Flo	on 119.07(3)(i), Florida Statutes. I further center legal effect as if made under oath; that I are orida Statutes; and that my name appears in the control of the control o	tify that the ir am an officer n Block 10 or	nformation or director Block 11 if

₽<u>EOURichard</u> Puertas