

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000086131

1. Entity Name

R. I. EXCEL CONSTRUCTION M. B., INC.



Principal Place of Business

8873 HARDING AVENUE
MIAMI BEACH, FL 33154

Mailing Address

8873 HARDING AVENUE
MIAMI BEACH, FL 33154



04292004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0299093

Applied For
Not Applicable

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

5. Name and Address of Current Registered Agent

ZAYAS, ARIEL
625 75TH STREET #3
MIAMI BEACH, FL 33141

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signatures required when reinstating)

DATE

4/29/04

**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

TITLE D
NAME IZQUIERDO, RAFAEL
STREET ADDRESS 8873 HARDING AVENUE
CITY - ST - ZIP SURFSIDE, FL 33154

TITLE D
NAME IZQUIERO, DONNA
STREET ADDRESS 8873 HARDING AVENUE
CITY - ST - ZIP SURFSIDE, FL 33154

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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U00000155644
05/05/04-80044-016 150.00

**DO NOT WRITE
IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/04

Date

865-8985

Daytime Phone #