

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 17, 2003 8:00 am**  
**Secretary of State**

01-17-2003 90126 029 \*\*\*150.00

**DOCUMENT # P02000090744**

1. Entity Name  
**JENNY'S CONSTRUCTION, INC.**



Principal Place of Business  
**3660 NE 166 STREET  
N. MIAMI BEACH FL 33160**

Mailing Address  
**3660 NE 166 STREET  
N. MIAMI BEACH FL 33160**

**70012470**



2. Principal Place of Business  
**3660 NE 166 STREET # 414**

3. Mailing Address  
**3660 NE 166 STREET # 414**

Suite, Apt. #, etc.  
**# 414**

Suite, Apt. #, etc.  
**# 414**

City & State  
**N. MIAMI BEACH, FL**

City & State  
**N. MIAMI BEACH, FL**

Zip  
**33160** Country  
**USA**

Zip  
**33160** Country  
**USA**

4. FEI Number  
**41-2056012**

Applied For  
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

## 6. Name and Address of Current Registered Agent

**PORRUA, JOEL  
3660 NE 166 STREET  
N. MIAMI BEACH FL 33160**

## 7. Name and Address of New Registered Agent

Name  
**PORRUA JOEL**  
Street Address (P.O. Box Number is Not Acceptable)  
**3660 NE 166 STREET # 414**  
City  
**N. MIAMI BEACH, FL** Zip Code  
**33160**

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 DATE **01-09-03**

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 PORRUA, JOEL** ☒ Delete  
**3660 NE 166 STREET**  
**N. MIAMI BEACH FL 33160**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D PORRUA, JOEL L.** ☒ Change ☐ Addition  
**3660 NE 166 STREET # 414**  
**N. MIAMI BEACH, FL 33160**

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  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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☐ Change ☐ Addition

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☐ Change ☐ Addition

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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: **REQUIRED PORRUA**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE **01-09-03** (305) 441-0909

Date

Daytime Phone #

CR2E034 (10/02)