

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2003 8:00 am
Secretary of State

03-19-2003 90091 041 ***150.00

DOCUMENT # P02000093908

1. Entity Name
GECU ENGINEERING SERVICES, INC.



Principal Place of Business
**5249 W 24TH CT
HIALEAH FL 33016**

Mailing Address
**5249 W 24TH CT
HIALEAH FL 33016**



2. Principal Place of Business
400 W 29TH PLACE

3. Mailing Address
400 W 29 PLACE

Suite, Apt. #, etc.
202

Suite, Apt. #, etc.
202

☒ CHECK HERE IF MAKING CHANGES

City & State
HIALEAH FL

City & State
HIALEAH, FL

4. FEI Number
03-0480091

Applied For
Not Applicable

Zip
33012

Country

Zip
33012

Country

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

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145**

Name
EMILIO DE ACOSTA

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

4445 W 16 AVE SUITE 502

City
HIALEAH

FL

Zip Code
33012

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] EMILIO DE ACOSTA**

3/6/03

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
**PTD
UMPIERRE, ELTON
5249 W 24TH CT
HIALEAH FL 33016** ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VSD
CASTILLO, GILBERTO
5249 W 24TH CT
HIALEAH FL 33016** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P/S/T
GILBERTO CASTILLO
400 W 29 PL. # 202
HIALEAH, FL 33012** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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☐ 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: **SIGNATURE OF GILBERTO CASTILLO** **3/6/03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)