

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 15, 2008 08:00 AM  
Secretary of State

DOCUMENT # P05000010902

1. Entity Name  
UNION CONSTRUCTION OF SARASOTA, INC.



Principal Place of Business  
8439 BRANDEIS CIRCLE EAST  
SARASOTA, FL 34234

Mailing Address  
8439 BRANDEIS CIRCLE EAST  
SARASOTA, FL 34234



02082008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-2169288

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

BELHOCHAT, MARY  
3934 TROPICAIRES BLVD  
NORTH PORT, FL 34286

**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 Mary Belhouchat

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

(NOTE: Registered Agent signature required when reinstating)

02/08/2008

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
ROSAS-RAMOS, EFRAIN  
8439 BRANDEIS CIRCLE EAST  
SARASOTA, FL 34234

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DST  
ROSAS-RAMOS, RUBEN  
8439 BRANDEIS CIRCLE EAST  
SARASOTA, FL 34234

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U000000629497  
02/26/08-80043-010 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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]  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/11/2008

941-544-1387

Date

Daytime Phone #