

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 25, 2003 8:00 am**  
**Secretary of State**

04-25-2003 90143 040 \*\*\*158.75

**DOCUMENT # P92000003842**

**1. Entity Name**  
**ALL FLORIDA CONSTRUCTION COMPANY**



**Principal Place of Business**

6090 SW 78TH ST  
S. MIAMI FL 33143  
US

*Correct*

**Mailing Address**

6090 SW 78TH ST.  
SOUTH MIAMI FL 33143-5023  
US

*Correct*

**2. Principal Place of Business**

6090 SW 78TH ST  
Suite, Apt. #, etc.

**3. Mailing Address**

6090 SW 78TH ST  
Suite, Apt. #, etc.

**City & State**

South Miami FL

Zip 33143 Country USA

**City & State**

South Miami FL

Zip 33143 Country USA

**4. FEI Number**

65-0322731

**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**

JOSEPH, CHARLES E  
6090 SOUTH WEST 78TH STREET  
SOUTH MIAMI FL 33143

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

**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 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**

TITLE	PCT	<input type="checkbox"/> Delete
NAME	JOSEPH, CHARLES E.	
STREET ADDRESS	6090 SW 78TH ST.	
CITY-ST-ZIP	SOUTH MIAMI FL	
TITLE	VPSP	<input type="checkbox"/> Delete
NAME	JOSEPH, MARGARET R.	
STREET ADDRESS	6090 SW 78TH ST.	
CITY-ST-ZIP	SOUTH MIAMI FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	JOSEPH, CHARLES II	
STREET ADDRESS	6090 SW 78TH ST.	
CITY-ST-ZIP	SOUTH MIAMI FL	
TITLE	DAS	<input type="checkbox"/> Delete
NAME	JOSEPH, CHRISTINA E.	
STREET ADDRESS	6090 SW 78TH ST.	
CITY-ST-ZIP	SOUTH MIAMI FL	
TITLE	DAVP	<input type="checkbox"/> Delete
NAME	JOSEPH, BRYAN A.	
STREET ADDRESS	6090 SW 78TH ST.	
CITY-ST-ZIP	SOUTH MIAMI FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Same	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VICE PRES./DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARGARET R. Joseph	
STREET ADDRESS	6090 SW 78TH ST.	
CITY-ST-ZIP	SOUTH MIAMI FL	
TITLE	Same	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Same	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VICE PRES./SECRETARY/DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRYAN A. Joseph	
STREET ADDRESS	6090 S.W. 78TH ST.	
CITY-ST-ZIP	SOUTH MIAMI, FL	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**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:**

*Charles E. Joseph Pres.*  
CHARLES E. JOSEPH  
PRESIDENT

Apr. 21, 2003 305-665-5098  
Date Daytime Phone #

CR2E034 (10/02)