

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90725 044 ***158.75

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P93000036687

1. Entity Name

CONSTRUTECH INC.

BU0034400

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

13200 SW 128 ST

Suite, Apt. #, etc.

UNIT B4

City & State

MIAMI, FLORIDA

Zip

33186

Country

3. Mailing Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0582992

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name **Mercedes Fuertes-Ojito**

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

13200 SW 128 ST, B4

City

Miami

FL

Zip Code
33186

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP
P, VP, S, T, D	Mercedes Fuertes-Ojito	13200 SW 128 ST, B4	Miami, FL 33186
TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP
TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP
TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP
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TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP

**DO NOT WRITE
IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other fee empowered.

SIGNATURE:

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/02

305-235-2370

CR2E034B (12/01)