

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State
 05-06-2002 90215 022 ***158.75

DOCUMENT # P93000041061

1. Entity Name
C.M.B. ENGINEERS, INC.

Principal Place of Business

Mailing Address

**4936-A 74TH COURT
 MIAMI FL 33155**

**4936-A 74TH COURT
 MIAMI FL 33155**

2. Principal Place of Business
2740 S.W. 97 Avenue

3. Mailing Address
2740 S.W. 97 Avenue

Suite, Apt. #, etc.
Suite #108

Suite, Apt. #, etc.
Suite #108

City & State
Miami, FL

City & State
Miami, FL

Zip
33165

Country
USA

Zip
33165

Country
USA

4. FEI Number
65-0434505

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**BARRENECHEA, CARLOS M
 4936-A 74TH COURT
 MIAMI FL 33155**

7. Name and Address of New Registered Agent

Name
Carlos M. Barrenechea
 Street Address (P.O. Box Number is Not Acceptable)
2740 S.W. 97 Avenue
Suite #108
 City
Miami **FL** Zip Code
33165

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

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

**CARLOS M BARRENECHEA
 VICE PRESIDENT**

(NOTE: Registered Agent signature required when reinstating)

DATE

04/22/02

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

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 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	D BARRENECHEA, CARLOS M 3383 N.E. 7TH ST. #307 MIAMI FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARRENECHEA, AUREA L 3383 N.W. 7TH ST. #307 MIAMI FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O MARTINEZ, EDUARDO 2770 W 62ND PLACE STE 203 HIALEAH FL 33016	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	O Mendez, Jose A. 2820 S.W. 104 Court Miami, FL 33165	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O Perez-Galceran, Gerardo S. 1540 N.E. 191 Street Apartment #211 Miami Beach, FL 33179	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Carlos M. Barrenechea
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**CARLOS M BARRENECHEA
 VICE-PRESIDENT**

Date

Daytime Phone #

04/22/02 (305) 552-8538

CR2E034 (9/01)