

2004 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000044960

1. Entity Name

DUMITRI'S CONSTRUCTION, INC.

Principal Place of Business

805 NW 7TH STREET ROAD
MIAMI FL 33136

Mailing Address

805 NW 7TH STREET ROAD
MIAMI FL 33136-3024

2. Principal Place of Business

Suite, Apt. #, etc

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc

City & State

Zip

Country

[Handwritten signature]

FILED

04 OCT -7 PM 2:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0417662

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HAMMES, DUMITRI
805 NW 7TH STREET ROAD
MIAMI FL 33136

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.

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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 15, 2004 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 ☐ Delete
NAME D
STREET ADDRESS HAMMES, DUMITRI
CITY-ST-ZIP 805 NW 7TH STREET ROAD
MIAMI FL 33136

TITLE ☐ Delete
NAME DVP
STREET ADDRESS HAMMES, RICHARD J
CITY-ST-ZIP 220 NW 118TH ST
MIAMI FL

TITLE ☐ Delete
NAME DST
STREET ADDRESS HAMMES, EDWARD J
CITY-ST-ZIP 3941 NW 171ST ST
MIAMI FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
500041666615
10/07/04--01015--016 **150.00

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

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

[Handwritten signature: Dumitri Hammes]

SEPT. 27 2004

CR2F034 (9/99)