

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000001679

1. Entity Name

LA ROCA CONSTRUCTION CORP.

FILED
Mar 30, 2000 8:00 am
Secretary of State

03-30-2000 90039 019 ***150.00

Principal Place of Business

Mailing Address

13801 SW 144 AVE ROAD
 STE 216
 MIAMI FL 33186
 US

13801 144 AVE ROAD
 STE 216
 MIAMI FL 33186-6766
 US

2. Principal Place of Business

7295 N.W. 64TH STREET

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

10

City & State

MIAMI FLORIDA

City & State

4. FEI Number

65-0458266

Applied For

Not Applicable

Zip

33166

Country

MIAMI-DADE

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NUNEZ, ALEJANDRO
 6361 SUNSET DRIVE
 MIAMI FL 33143

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 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	BARBA, NATIVIDAD	
STREET ADDRESS	121 NW 68TH CT	
CITY-ST-ZIP	MIAMI FL 33126	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BARBA, ARMANDO	
STREET ADDRESS	121 NW 68TH CT	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	LOURDES, MONTEJO	
STREET ADDRESS	8380 S.W. 4TH ST.	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	VALERO, LIZETTE	
STREET ADDRESS	14621 S.W. 110 TERR.	
CITY-ST-ZIP	MIAMI FL	
TITLE	VPST	<input type="checkbox"/> Delete
NAME	BARBA, ARMANDO J	
STREET ADDRESS	14621 SW 110TH TERR.	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Armando Barba VP
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/27/00 (305) 418-4188

Daytime Phone #

CR21 014 (MAR)