2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT, # P940000 11755 Apr 22, 2000 8:00 am Secretary of State DECO CONCRETE Builders : INC. 04-22-2000 90113 003 ***150.00 Principal Place of Business Mailing Address 13052 SW 13324 MIAMI, FL 33186 MIAMI, FL 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 65-0470884 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BARTRAN, RUBEN 13052 S.W. 133 nd CT Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33186 Zip Code City 1. 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (9/99) ☐ Addition ☐ Delete TITLE BORTRAN, RUBON NAME 13052 SW 133 M CT STREET ADDRESS SPARANTA LA SELE Minmi, FL CITY-ST-ZIP ST-71P ☐ Addition Change ☐ Defete TITLE NAME STREET ADDRESS ADDRESS MIAMI, FL 33186 CITY-ST-ZIP ☐ Addition TITLE Change □ Delete STREET ADDRESS ANNRESS ST-ZIP CITY-ST-7IP ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS .me : : AMMRESS CITY-ST-ZIP ST - 71P ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS : f **alweil** dd CITY-ST-ZIP ST ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP ST ZIP 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.