2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P94000014865

1. Entity Name

COSTA AZUL CONSTRUCTION CORPORATION



Principal Place of Business 1078 CONDOR PLACE WINTER SPRINGS FL 32708 US		Mailing Address 1078 CONDOR PLACE WINTER SPRINGS FL 32708 US						
2. Principal P	lace of Business	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4.	4. FE! Number 59-3225607		Applied For Not Applicable	
Zip	Country	Zip	Country	5.	Certificate of Status Desired	- 60.75	ditional	
	6. Name and Address of Current F	legistered Agent		7. 1	Name and Address of New Registe			
			Name					
CUADRA, LUIS 1078 CONDOR PLACE			Street	Street Address (P.O. Box Number is Not Acceptable)				
WINTER SPRINGS FL 32708								
			City			FL Zip Coo	le	
8. The above	named entity submits this statement for	the purpose of changing its	registered office	or registered ag		<u> </u>		
SIGNATURE _	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	: Registered Agent sign	ature required when re	einstaturg) D	ATE		
Tax filing re	ration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	FILE NOW!!L FEE IS \$15 After May 1, 2002 Fee will be Make Check Payable to Departme		550.0 0	10. Election Campaign Financing Trust Fund Contribution.		May Be	
11.	OFFICERS AND D	RECTORS	12.	AD	DDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS	PDS CUADRA, LUIS A 1078 CONDOR PLACE	☐ Delete	TITLE NAME STREET ADDRESS	SULLIV	IAN, JAMES M.	☐ Change	X Addition 3	
CITY-ST-ZIP	WINTER SPRINGS FL 32708		CITY-ST-ZIP		SPLINES, FL 32708		L	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SULLIVAN, JAMES M 1078 CONDOR PLACE WINTER SPRINGS FL 32708	⊠ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		LA JR., LUIS A. CONDOR PLACE L SPLANCE, FL 32706	☐ Change	⊠ Addition C	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1078 C	A, Luis de. Ondoc Place L 1920/4, Fl 32701	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	Delete _	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied with th	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	tool in Castian	110 07(0V6) Flexible Over 11 11	☐ Change	Addition	

13. Thereby certify first the Information supplied with this filing does not quality 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 accuracy 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 effect 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 impowered.

SIGNATURE

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SIGNATURE AND TYPED ON PHINTED NAME OF SIGNING OFFICER OR DIRECTOR