Daytime Phone #

## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED Jan 30, 2001 8:00 am Secretary of State DOCUMENT # P94000047525 CENTURY BUILDERS GROUP, INC. 01-30-2001 90125 021 \*\*\*150.00 Mailing Address Principal Place of Business 7270 NW 12 STREET 7270 NW 12 STREET SLITE 410 SUITE 410 612080 **MIAMI FL 33126** MIAMI FL 33126 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0502494 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name REILLY, KEYLA A Street Address (P.O. Box Number is Not Acceptable) 7270 NW 12 STREET SUITE 410 MIAMI FL 33126 Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. DPC TITLE ☐ Delete TITLE Change 72704.W. 12TO ST, OTE 410 PINO, SERGIO NAME NAME STREET ADDRESS STREET ADDRESS 7270 NW 12 STREET . SUITE 410 33(2) CITY-ST-ZIP CITY-ST-ZIP MISMI A. MIAMI FL 33126 ☐ Change ☐ Addition Delete TITLE TITLE REILLY, KEYLA A NAME NAME STREET ADDRESS STREET ADDRESS 7270 NW 12 STREET, SUITE 410 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33126 ☐ Change Addition TITLE TITLE, Delete ... Norris, Wayne 7270 NW 12 St, St. 410 DE LA FUENTE, EMILIANO NAME NAME STREET ADDRESS STREET ADDRESS 7270 NW 12 STREET, SUITE 410 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33126 ☐ Change ■ Addition TITLE Delete TITLE **GUERRA, ARMANDO** NAME NAME STREET ADDRESS 7270 NW 12 STREET, SUITE 410 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33126 ☐ Delete TITLE Change Addition CANCELA, JOSE NAME NAME STREET ADDRESS STREET ADDRESS 7270 NW 12 STREET, SUITE 410 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33126 ☐ Delete TITLE ☐ Change ☐ Addition TITLE RABELL, LUIS NAME 7270 NW 12 ST, SUITE 410 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33126 13. I hereby certify that the information supplied with this filling sloes 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 tlue and adourate and that my signature shall have the same legal effect at if made under oath; that I am an officer or director of the corporation or the receiver or trusted 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 appears, with all other line propowered.

NG OFFICER OR DIRECTOR