2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2001 8:00 am
Secretary of State
03-28-2001 90225 043 ***158.75

DOCUMENT # P95000080888

C0038657

1. Entity Name

NOVA CONSTRUCTIONS, INC.

Principal Place of Business | Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5100 BURCHETTE ROAD	5100 BURCHETTE RD.
Suite, Apt. # etc. STE. 2104	Suite, Apt. # etc. STE. 2104
City, State TAMPA, FL 33647	City & State TAMPA FLORIDA
Zip 33647 County HILLSBOROUGH	Zip 33647 Country HILLSBOROUGH

4. FEI Number 59-3343125 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ X **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name: RICARDO A. ALVAREZ-SALGADO

Street Address (P.O. Box Number is Not Acceptable): ~~5100 BURCHETTE RD. STE. 2104~~

City: TAMPA FL Zip: 33647

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: RICARDO A ALVAREZ-SALGADO DATE: 3/16/2001

(If an agent is typed or printed name of registered agent and title if applicable. NOTE: Registered Agent's signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
PRES./DIR. RICARDO A. ALVAREZ-SALGADO 5100 BURCHETTE RD. STE. 2104 TAMPA, FL. 33647	☐ Delete		☐ Change ☐ Addition
SEC./TREASURER CONSUELO LLORENS 5100 BURCHETTE RD., STE. 2104 TAMPA, FL. 33647	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition

C99E133 (8/99)

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: RICARDO A ALVAREZ-SALGADO PRES. 3/16/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #