

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 04, 2002 8:00 am**  
**Secretary of State**

02-04-2002 90178 021 \*\*\*150.00

**DOCUMENT # P96000022355**

**1. Entity Name**  
**D. BROTHERS CONSTRUCTION, INC.**

**Principal Place of Business**

**5871 N UNIVERSITY DRIVE**  
**MIDWAY PLAZA, BOX 430**  
**TAMARAC FL 33321**  
**US**

**Mailing Address**

**1287 N UNIVERSITY DR**  
**SUITE 102**  
**CORAL SPRINGS FL 33071**  
**US**



DO NOT WRITE IN THIS SPACE

**2. Principal Place of Business**

**1287 N. UNIVERSITY DR.**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**SUITE 102**

**CITY & STATE**  
**CORAL SPRINGS, FL**

**CITY & STATE**

**Zip**  
**33071**

**Country**

**Zip**

**Country**

**4. FEI Number** **65-0646099**

**Applied For**  
**Not Applicable**

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

**6. Name and Address of Current Registered Agent**

**DEAN-DIAS, ELIZABETH**  
**1905 NW 49TH AVE**  
**COCONUT CREEK FL 33063**

**7. Name and Address of New Registered Agent**

**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, 2002 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**

**TITLE** **D** ☐ Delete  
**NAME** **DEAN-DIAS, ELIZABETH**  
**STREET ADDRESS** **1905 NW 49TH AVE**  
**CITY-ST-ZIP** **COCONUT CREEK FL**

**TITLE** **DS** ☐ Delete  
**NAME** **DIAS, ALESSANDRA R**  
**STREET ADDRESS** **7205 SPORTSMAN DR**  
**CITY-ST-ZIP** **N. LAUDERDALE FL 33068**

**TITLE** **VP** ☐ Delete  
**NAME** **DIAS, ENOQUE D**  
**STREET ADDRESS** **7205 SPORTSMAN DR**  
**CITY-ST-ZIP** **N. LAUDERDALE FL 33068**

**TITLE** **P** ☐ Delete  
**NAME** **DIAS, ELCIMAR**  
**STREET ADDRESS** **1905 NW 49TH AVE**  
**CITY-ST-ZIP** **COCONUT CREEK FL 33063**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** ☒ Change ☐ Addition  
**NAME**  
**STREET ADDRESS** **6895 NW 108TH AVENUE**  
**CITY-ST-ZIP** **PARKLAND, FL 33076**

**TITLE** ☒ Change ☐ Addition  
**NAME**  
**STREET ADDRESS** **5024 NW 57TH WAY**  
**CITY-ST-ZIP** **CORAL SPRINGS, FL 33067**

**TITLE** ☒ Change ☐ Addition  
**NAME**  
**STREET ADDRESS** **5024 NW 57TH WAY**  
**CITY-ST-ZIP** **CORAL SPRINGS, FL 33067**

**TITLE** ☒ Change ☐ Addition  
**NAME**  
**STREET ADDRESS** **6895 NW 108TH AVENUE**  
**CITY-ST-ZIP** **PARKLAND, FL 33076**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ 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:**

**SIGNATURE**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**ELCIMAR DIAS**

**1/17/02**  
Date

**954-340-5270**  
Daytime Phone #

CR2E034 (9/01)