

2000 UNIFORM BUSINESS REPORT (UBR)

081400

10f2

DOCUMENT # **PA0000051322**

1. Entity Name
ASSOCIATES HOME CONSTRUCTION

FILED

00 AUG 15 AM 10:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
**1232 FERDINAND STREET
CORAL GABLES, FLORIDA 33134**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number 59-2293602 Applied For Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**RALPH K. WILSON
1232 FERDINAND STREET
CORAL GABLES, FLORIDA 33134**

7. Name and Address of New Registered Agent

Name **2000002384472--9**
Street Address (P.O. Box Number is Not Acceptable) **09706/00--01113--001**
******158.75 ****158.75**
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 **Ralph K. Wilson**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

08-09-00

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, 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

TITLE ☒ Delete
NAME **PRESIDENT**
STREET ADDRESS **RALPH K. WILSON**
CITY-ST-ZIP **1232 FERDINAND STREET
CORAL GABLES, FLORIDA 33134**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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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
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **PRESIDENT**
STREET ADDRESS **FELIX GIL**
CITY-ST-ZIP **1232 FERDINAND STREET
CORAL GABLES, FLORIDA 33134**

TITLE ☐ Change ☒ Addition
NAME **VICE PRESIDENT**
STREET ADDRESS **LUIS F. AMAYA**
CITY-ST-ZIP **7699 SW 153 CT #206
MIAMI, FLORIDA 33139**

TITLE ☐ Change ☒ Addition
NAME **TREASURER/ SECRETARY**
STREET ADDRESS **RALPH K. WILSON**
CITY-ST-ZIP **1232 FERDINAND STREET
MIAMI, FLORIDA 33134**

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: **Ralph K. Wilson**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/09/00

Date

Daytime Phone #

CR2E034 (9/99)

KE

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State Lic. Roofing Contractors CCC020240
State Lic. General Contractors CGC007449

ASSOCIATES
Home Construction Corp.
1232 Ferdinand Street, Coral Gables, FL 33134
Phone: (305) 266-6974 Fax: (305) 265-7406

August 09, 2000

UNIFORM BUSINESS REPORT
DIVISION OF CORPORATIONS
P.O. Box 1500
Tallahassee, FL 32302-1500

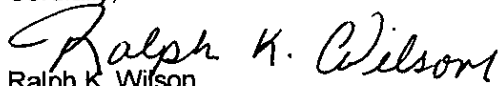
Re: Associates Home Construction Corporation
Registration No. P96000051332

Dear Sirs:

The following is a request to waive the late charges because we never received the UBR 2000 Form in the mail.

If you have any questions, please feel free to contact me at (305) 266-6974.

Cordially,


Ralph K. Wilson