

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000065874

1. Entity Name  
A&E BUILDERS, INC.

**FILED**  
**May 12, 2000 8:00 am**  
**Secretary of State**

05-12-2000 90082 011 \*\*\*150.00

Principal Place of Business

10514 WEST FLAGLER  
MIAMI FL 33174  
US

Mailing Address

2732 S W 137TH AVENUE  
SUITE 114  
MIAMI FL 33175-6324  
US

2. Principal Place of Business

10516 West Flagler ST

3. Mailing Address

10516 West Flagler ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FLORIDA

Zip

33172

Country

MIAMI-DADE

Zip

33172

Country

MIAMI-DADE

4. FEI Number

65-0684698

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

AMBROGI, OCATVIO C  
5357 W 24TH COURT  
HIALEAH FL 33016

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, 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

T  
AMBROGI, OCTAVIO C  
5457 WEST 24TH COURT  
HIALEAH FL 33016 ☐ Delete

VP  
ALFARO, ROBERTO D  
435 S W 95TH CT  
MIAMI FL ☐ Delete

P  
CORDOBA, RAFAEL  
5461 S W 144TH AVENUE  
MIAMI FL 33175 ☐ Delete

S  
ZUNIGA, RAFAEL A  
11502 S W 127TH CT  
MIAMI FL 33183 ☐ Delete

☐ Delete

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)