2000 UNIFORM BUSINESS REPORT (UBR) FILED Feb 29, 2000 8:00 am DOCUMENT # **P97000036494** Secretary of State MARTIN & SONS BUILDING, INC. 02-29-2000 90141 047 ***150.00 Mailing Address Principal Place of Business 13800 SW 8TH STREET 13800 SW 8TH STREET #103 #103 MIAMI FL 33184-3032 MIAMI FL 33184 3. Mailing Address 2. Principal Place of Business 7401 NW 8 ST 7401 NW 8 ST -Bav M Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE BAY M BAY -M Applied For City & State City & State MIAMI, 4. FFI Number FLORIDA MIAMI , FLORIDA 65-0747455 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 33126 DADE Fee Required 33126 DADE 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MARTIN, EDUARDO MARTIN, EDUARDO Street Address (P.O. Box Number is Not Acceptable) 13800 SW 8TH STREET #103 7401 NW 8 ST BAY-M MIAMI FL 33184 CHMIAMI , FLORIDA 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. X Change ☐ Addition PTS Delete TITLE TITLE MARTIN, EDUARDO MARTIN, EDUARDO NAME NAME 13800 SW 8TH ST, #103 STREET ADDRESS 7401 NW 8ST BAY-M STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33184** <u>MIAMI, FLORIDA 33126</u> CITY-ST-ZIP ☐ Addition x Change TITLE ☐ Delete TITLE MARTIN, ISABEL MARTIN, ISABEL NAME NAME 13800 SW 8TH ST, #103 STREET ADDRESS 7401 NW 8ST BAY-M STREET ADDRESS CITY-ST-ZIP MIAMI, FLORIDA 33126 CITY-ST-ZIP MIAMI FL 33184 ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not quality 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 received and fail my eignature 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 appoint 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 the true empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/00

(305) 264-0421

Daytime Phone #