2000 UNIFORM BUSINESS REPORT (UBR) FILED Sep 12, 2000 8:00 am Secretary of State DOCUMENT # P97000078977 1. Entity Name M. & R. BUILDERS GROUP, INC. 06-09-2000 90213 014 ***158.75 09-12-2000 90150 017 ***391.25 Principal Place of Business Mailing Address 1659 WEST 39 PLACE 1659 WEST 39 PLACE HIALEAH FL 33012 HIALEAH FL 33012 40011004 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0780352 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent - 7. Name and Address of New Registered Agent Name RUIZ, ROLANDO Street Address (P.O. Box Number is Not Acceptable) **1659 WEST 39 PLACE** HIALEAH FL 33012 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 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Delete TIT! F ☐ Change Addition RUIZ, ROLANDO NAME NAME **1659 WEST 39 PLACE** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33012 Addition ☐ Change TITLE ☐ Delete TITLE LINARES, MIGUAL NAME STREET ADDRESS 26 SW 39TH AVE. STREET ADDRESS CITY-ST-ZIP MIAMI FL 33134 CITY-ST-ZIP ☐ Delete ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: *

STREET ADDRESS

CITY-ST-ZIP

SUPPLIED THE DIRECTION OF THE OFFICER OF OFF

9-6-00

Date Daytime Phone #

HIALEAH, GLORIDE, SOPT. 6-2000

JEAR SIRS!

ENCLOSED HEREWITH, PLEASE FIND OUR CHECK Nº 2241, INTHE DMOUNT OF \$ 391,25 WHICH-IS THE CLOIMED DIFFERENCE BY THAT INSTITUTION.

THANKING YOU ONCE AGEIN FOR YOUR KIND ATTENTION AND CONSIDERATION, WE REMAIN Yours SINCERELY,

M. & R. BUILDERS GROUP. INC

PREVIOUS PAYMENT: CHECK # 2/35 AMOUNT # 138-75