2001 UNIFORM BUSINESS REPORT (UBR)

Mar 13, 2001 8:00 am DOCUMENT # P97000080647 **Secretary of State** B & A CONSTRUCTION SERVICES GROUP, INC. 03-13-2001 90071 027 ***150.00 Principal Place of Business Mailing Address 12380 SW 130TH STREET 12380 SW 130TH STREET MIAMI FL 33186 MIAMI FL 33186 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0782822 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GUARDIA, TERESITA C Street Address (P.O. Box Number is Not Acceptable) 12380 SW 130TH STREET **MIAMI FL 33186** City 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) FILE NOW!!! FEE IS \$150.00 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 MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change Addition CR2E034 (10/00) GUARDIA, TERESITA C NAME NAME STREET ADDRESS 12380 SW 130TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33186** TITLE ☐ Delete TITLE ☐ Change Addition GUARDIA, TERESITA C NAME NAME STREET ADDRESS STREET ADDRESS 12380 SW 130TH STREET CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33186** TITLE TITLE ☐ Change ■ Addition NAME TORRES, MARIO C NAME STREET ADDRE STREET ADDRESS 12380-SW-130TH-STREET CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33186** TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

with all other like empowered.

ent with an address