## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

SIGNATURE REQUIRED

P98000006589 **DOCUMENT #** 

1. Entity Name

SIGNATURE:



3/:

**FILED** Mar 28, 2003 8:00 am Secretary of State

03-17-2003 90056 001 \*\*\*150.00

(305)

| GRANADA HOME BUILDERS, INC  |  |   |  | )  |                                       |
|---|--|---|--|--|---------------------------------------|
| 13522 S.W. 62 LANE 13522 S.W. (   |  | Mailing Address<br>13522 S.W. 62 LANE<br>MIAMI FL 33183 |  | ,  |                                       |
|   |  |   |  |  |                                       |
| Principal Place of Business     3. Mailing /  |  | 3. Mailing Address                                      |  | I SO DAIREOT RIVE TOTALD TOTALD CERTIT BENIT ELOVAL EDIKAL T   | IDING DAUDY ONTO A TOLICO LONG ADOL   |
| Suite, Apt. #, etc. Suite, Apt. #, etc.   |  |   | ☐ CHECK HERE IF MAKING                             | CHANGES  |                                       |
| City & State  |  | City & State  |  | 4. FEI Number 65-0829128   | Applied For<br>Not Applicable         |
| Zip   | Country                                | Zip   | Country  |  | \$8.75 Additional<br>Fee Required     |
|   | 6. Name and Address of Current         | Registered Agent  |  | 7. Name and Address of New Registered A  | lgent                                 |
|   |  |   | Name   |  |                                       |
| CRAFT, ANA R<br>13701 NORTH KENDALL DRIVE   |  |   | Street Address (P.O. Box Number is Not Acceptable) |  |                                       |
| SUITE 303   |  |   |  |  |                                       |
| MIAMI FL  | 33186                                  |   | 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. I am familiar with, and accept the obligations of registered agent.   |  |   |  |  |                                       |
| SIGNATURE   |  |   |  |  |                                       |
| FILE NOWILL FIFE IS \$150.00  |  |   |  |  |                                       |
| Afte  | r May 1, 2003 Fee Will be \$550.00     |   |  | 9. Election Campaign Financing Trust Fund Contribution.  | \$5.00 May Be<br>Added to Fees        |
|   | k Payable to Florida Department of     | <del></del>   |  | 100 TO 10 |                                       |
| TILE  | OFFICERS AND                           | Delete  | 11.  | ADDITIONS/CHANGES TO OFFICERS AND  |                                       |
| NAME  | RODRIGUEZ, CARLOS A                    | C Veters  | NAME   |  | 2000000                               |
| STREET ADDRESS  | 13532 SW 62 LANE                       |   | STREET ADDRESS                                     |  | 12                                    |
| CITY-ST-ZIP   | MIAMI FL 33186                         |   | CITY-ST-ZIP  |  | Change Addition 2001                  |
| TITLE   | VPS                                    | ☐ Delete  | TITLE  |  | ☐ Change ☐ Addition ☐                 |
| NAME<br>STREET ADDRESS  | RODRIGUEZ, GABINO<br>13532 SW 6TH LANE |   | NAME<br>STREET ADDRESS                             |  | ļ                                     |
| CITY-ST-ZIP   | MIAM) FL 33265                         |   | CITY-ST-ZIP  |  | · · · · · · · · · · · · · · · · · · · |
| TITLE   | Berthay Rodria                         | UEZ Delete  | TITLE  | <del></del>  | ☐ Change ☐ Addition                   |
| NAME  | ASOT V.P./ASO                          | .Sec  | . NAME   |  |                                       |
| STREET ADDRESS<br>CITY-ST-ZIP   | 13522 3W 62<br>Miami FL 33             | 26.6  | STREET ADDRESS<br>CITY-SI-ZIP                      |  |                                       |
| TITLE   | Aost. Se                               | C → □ Delete  | TITLE  |  | ☐ Change ☐ Addition                   |
| NAME<br>CTREET ADDRESS  | Flora Rodriga                          | /ez   | NAME<br>OTREET ARROSON                             |  |                                       |
| STREET ADDRESS<br>CITY-ST-ZIP   | 13522 SW 421<br>Miomi FL 3320          |   | STREET ADDRESS<br>CITY-ST-ZIP                      |  | 1                                     |
| TITLE   | Tresures                               | ☐ Delete  | TITLE  |  | ☐ Change ☐ Addition                   |
| NAME  | Jorge L. Poder                         | 9UEZ  | NAME   |  |                                       |
| STREET ADDRESS  | 13522 SW 424                           | 0.  | STREET ADDRESS                                     |  | 1                                     |
| CITY-ST-ZIP   | Miami FL B3                            |   | CITY-ST-ZIP  | <u> </u>   |                                       |
| TITLE   | Asot Sec./Vil                          | Oelete □ Oelete   | TITLE  |  | ☐ Change ☐ Addition                   |
| NAME<br>Street Address 1  | Juan Garus                             | n- 1  | NAME<br>STREET ADDRESS                             | ,  | 1                                     |
| CITY-ST-ZIP   | 1                                      | 3265  | CITY-ST-ZIP  |  | , ,                                   |
|   |  |   |  | ection 119.07(3)(i). Florida Statutes. I further certi   | fy that the information               |
| 12. Thereby 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 of 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |  |   |  |  |                                       |