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

## DOCUMENT #

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

998 S.W. 11TH STREET

MIAMI FL 33129

P98000105894

Mailing Address

MIAMI FL 33129

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

998 S.W. 11TH STREET

1. Entity Name

ENRIQUE PADRON CONSTRUCTION CORP.

Country

6. Name and Address of Current Registered Agent



**FILED** Apr 23, 2003 8:00 am Secretary of State 04-23-2003 90117 010 \*\*\*150 00

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☐ CHECK HERE	IF MAKI	NG CHANGES	
4. FEI Number 65-088689	1	Applied For	
05-00009	ı	Not Applicable	
5. Certificate of Status Desired	\$8.75 Additional Fee Required		
7. Name and Address of New F	legistere	d Agent	
THE PERSON AND THE PE			

PADRON, ENRIQUE 998 S.W. 11TH STREET MIAMI FL 33129

Name 3		•
Street Address (P.O. Box Number is Not Acceptable	<del>)</del>	
City	FL	Zip Code

9. Election Campaign Financing

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.

Country

FILE NOW!!! FEE IS \$150.00

Signature, typed or printed name of registered agent and title if applicable.

\$5.00 May Be

After May 1, 2003 Fee will be \$550.00

Make Check	Payable to Florida Department of State			Trust Fund Contribution.	☐ Added	to Fees	
10. OFFICERS AND DIRECTORS			11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD PADRON, ENRIQUE 998 S.W. 11TH STREET MIAMI FL 33129	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	: 4.	☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP		☐ Change	Addition	
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

305 8566682