

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

FILED

03 JAN 29 PM 12: 23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000020686

1. Entity Name

BUILD AMERICA, INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

13200 SW 128 STREET

3. Mailing Address

Suite, Apt. #, etc.

BLDG. G

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

Zip  
33186

Country  
UNITED STATES

Zip

Country

4. FEI Number

650907208

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

01/31/03--01065--005 \*\*185.00

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **JUAN E. FIGUERAS, ESQ.**

Street Address (P.O. Box Number is Not Acceptable)

7050 SW 86 AVE.

City **MIAMI**

**FL**

Zip Code  
**33143**

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

*Juan E. Figueras*

**JUAN E. FIGUERAS, ESQ.**

**1 / 27 / 3**

DATE

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

(NOTE: Registered Agent signature required when reinstating.)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT MANUEL O. QUINTANA 13200 SW 128 STREET, BLDG. G MIAMI FLORIDA 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT, SECERTARY JOSE LUIS OLIVEROS 13200 SW 128 STREET, BLDG. G MIAMI FLORIDA 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT, TREASURER MAURICIO NIETO 13200 SW 128 STREET, BLDG. G MIAMI FLORIDA 33186
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Manuel Quintana, President*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-27-03

Date

(305) 256-2828

Daytime Phone #

CR2E034B (12/02)