

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State
 03-05-2002 90066 038 ***150.00

DOCUMENT # P99000035849

1. Entity Name
G & H BUILDING SERVICES, INC.

Principal Place of Business
12325 SOUTHWEST 31ST STREET
MIAMI FL 33175

Mailing Address
12325 SOUTHWEST 31ST STREET
MIAMI FL 33175

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0912933**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

Name

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

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD**
 NAME **FARINAS, HECTOR**
 STREET ADDRESS **12325 SOUTHWEST 31ST STREET**
 CITY-ST-ZIP **MIAMI FL 33175**

☒ Delete

TITLE **PD**
 NAME **Godofredo Farinas**
 STREET ADDRESS **12325 SW 31ST**
 CITY-ST-ZIP **MIAMI, FL 33175**

☒ Change ☐ Addition

TITLE **STD**
 NAME **FARINAS, GODOFREDO**
 STREET ADDRESS **12325 SOUTHWEST 31ST STREET**
 CITY-ST-ZIP **MIAMI FL 33175**

☐ Delete

TITLE
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☐ Change ☐ Addition

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.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 12, 2002
305 778-4347
305-227-0231

CR2E034 (9/01)