

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000043187

1. Entity Name  
ZOMEX CONSTRUCTION, INC.

**FILED**  
**Jan 30, 2002 8:00 am**  
**Secretary of State**

01-30-2002 90144 003 \*\*\*150.00

Principal Place of Business  
1320 S. DIXIE HIGHWAY  
SIXTH FLOOR  
CORAL GABLES FL 33146

Mailing Address  
1320 S. DIXIE HIGHWAY  
SIXTH FLOOR  
CORAL GABLES FL 33146



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0933819

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

DUNCAN, ROSARIO P  
1320 S. DIXIE HIGHWAY  
SIXTH FLOOR  
CORAL GABLES FL 33146

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

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

(NOTE: Registered Agent signature required when reinstalling)

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  
NAME PSTD  
STREET ADDRESS SIERRA, ANTONIO M  
CITY-ST-ZIP 1320 S. DIXIE HIGHWAY SIXTH FLOOR  
CORAL GABLES FL 33146 ☐ Delete

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME V  
STREET ADDRESS DUNCAN, ROSARIO P  
CITY-ST-ZIP 1320 S. DIXIE HIGHWAY SIXTH FLOOR  
CORAL GABLES FL 33146 ☐ Delete

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Signature of Antonio M. Sierra*  
ANTONIO M. SIERRA, President

1/15/02  
Date

305668-5100  
Daytime Phone #

CR2E034 (9/01)