2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P99000064888 **DOCUMENT #**

1. Entity Name
ACOS CONSTRUCTION COMPANY



May 01, 2003 8:00 am Secretary of State 05-01-2003 90224 050 ***150.00

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Principal Place of Business 431 SOUTH LAKE WORTH FL 33460		Mailing Address 431 SOUTH LAKE WORTH FL 33460				- , "	
		I'ME WOMMING GONG		ĺ			
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE	IF MAKING CHANG	BES
City & State		City & State			4. FEI Number 65-0930355		Applied For
Zip	Country	Zip	Country		5. Certificate of Status Desired		Not Applicable Additional
6. Name and Address of Current		Registered Agent	ed Agent		Fee Required 7. Name and Address of New Registered Agent		
o. Hallo and Addison of Darlan Hogisteries Again.				Name			
ACOSTA, 431 SOUT	•	Street Address (P.O. Box Number is Not Acceptable)		
	RTH FL 33460						
		City				FL Zip (Code
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered office of	or registere	ed agent, or both, in the State of Flo	rida. I am familiar w	ith, and accept
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	E: Registered Agent signa	ature required	when reinstating)	DATE	
	LE NOW!!! FEE IS \$150.00				9. Election Campaign Fin	ancing \$	5.00 May Be
	May 1, 2003 Fee will be \$550.00 Payable to Florida Department of				Trust Fund Contribution	n.	dded to Fees
10.	OFFICERS AND	DIRECTORS	11. 4.		ADDITIONS/CHANGES TO OFF		- .
TITLE	ACOSTA IOSEV	☐ Delete	TITLE	TRE	ASUREL 2114 ALOSTA	☐ Chan	nge 🔀 Addition
NAME STREET ADDRESS	ACOSTA, JOSE V 431 SOUTH C ST.		NAME	SA	South C'ST		
CITY-ST-ZIP	LAKE WORTH FL 33460		STREET ADDRESS CITY-ST-ZIP	LOBE	· · · · · · · · · · · · · · · · · · ·	3460	
TITLE	V CANCULET CACCALIENTS	. Delete	τιτι <u>ξ</u>]		Chan	nge 🗌 Addition 🖟
NAME	SANCHEZ, SACRAMENTO 2132 WORTHINGTON ROAD		NAME				Į
STREET ADDRESS CITY-ST-ZIP	WEST PALM BEACH FL 33409		STREET ADDRESS CITY-ST-ZIP				
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	certify that the information supplied with	this filing does not qualify for		ted in Ser	otion 119.07(3)(i), Florida Statutes I	further certify that the	he information
indicated of the cor changed,	ertify that the information supplied with on this report or supplemental report is poration or the receiver of trustee empo or on an attachment with an addriss w	rue and accurate and that m wered to effect this report with all other like empowered.	ny signature shall i as required by Ch	nave the s apter 607,	ame legal effect as if made under of Florida Statutes; and that my name	ath; that I am an offi appears in Block 1	cer or director 0 or Block 11 if

SIGNATURE: