

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2003 8:00 am
Secretary of State

03-13-2003 90082 029 ***150.00

DOCUMENT # P99000070840

1. Entity Name
VELAZQUEZ CARPENTRY INC.



Principal Place of Business
**1013 CAROLINE AVE., SUITE B
AUBURNDALE FL 33823**

Mailing Address
**1013 CAROLINE AVE., SUITE B
AUBURNDALE FL 33823**



2. Principal Place of Business
186 OLD NICHOLS CIR
Suite, Apt. #, etc.

3. Mailing Address
186 OLD NICHOLS CIR
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
AUBURNDALE FL

City & State
AUBURNDALE FL

4. FEI Number **59-3595673**

Applied For
☐ Not Applicable

Zip Country
33823 USA

Zip Country
33823 USA

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

6. Name and Address of Current Registered Agent

**VELAZQUEZ, DAVID
1013 CAROLINE AVE., SUITE B
AUBURNDALE FL 33823**

7. Name and Address of New Registered Agent

Name
DAVID VELAZQUEZ
Street Address (P.O. Box Number is Not Acceptable)
186 OLD NICHOLS CIR
City
AUBURNDALE FL Zip Code
33823

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 *David Velazquez*
Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

03-10-03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 **PD** ☐ Delete
NAME **VELAZQUEZ, DAVID**
STREET ADDRESS **1013 CAROLINE AVE., SUITE B**
CITY-ST-ZIP **AUBURNDALE FL 33823**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
NAME **VELAZQUEZ, DAVID**
STREET ADDRESS **186 OLD NICHOLS CIR**
CITY-ST-ZIP **AUBURNDALE FL 33823**

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

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CITY-ST-ZIP

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 all other like empowered.

SIGNATURE: *David Velazquez*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-10-03

Date

Daytime Phone #

CR2E034 (10/02)