

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

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

05-01-2002 91566 038 \*\*\*150.00

**DOCUMENT # S-59560**

1. Entity Name

**FLORIDA MTH CONSTRUCTION CORP**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**1300 NW 124 WAY**

3. Mailing Address

**P.O. BOX 450488**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**CORAL SPRING, FL**

City & State

**MIAMI, FL**

Zip

**33076**

Country

Zip

**3345-0488**

Country

4. FEI Number

**65-0312452**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

**SERGIO E. RUIZ**

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

**210 N.W. 40 AVE**

City

**MIAMI**

**FL**

Zip Code

**33126**

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

*Sergio E. Ruiz*

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

(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) ☐

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DP  
ERIC SOTO - HARRISON  
1300 NW 124 WAY  
CORAL SPRING, FL 33076**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**VPT  
JACQUELINE BRULLARD L  
1300 N.W. 124 WAY  
CORAL SPRING, FL 33076**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**SO  
SERGIO E. RUIZ  
210 NW 40 AVE  
MIAMI, FL 33126**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Sergio E. Ruiz* SECRETARY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**04/22/02 (305) 262-1012**

Date

Daytime Phone #

CR2E034B (12/01)