

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2003 8:00 am
Secretary of State

05-22-2003 90143 048 ***550.00

0324271 AV

DOCUMENT # S59560

1. Entity Name

FLORIDA M.J.M. CONSTRUCTION CORP.



Principal Place of Business

**5300 NW 124 WAY
CORAL SPRINGS FL 33076**

Mailing Address

**P.O. BOX 450488
MIAMI FL 33245-0488**

2. Principal Place of Business

6073 NW 56TH CIRCLE

Suite, Apt. #, etc.

3. Mailing Address

6073 NW 56TH CIRCLE

Suite, Apt. #, etc.

City & State

CORAL SPRINGS, FL

City & State

CORAL SPRINGS, FL

Zip

33067

Country

U.S.A.

Zip

33067

Country

U.S.A.

4. FEI Number

65-0312452

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**RUIZ, SERGIO E
210 N.W. 40 AVE
MIAMI FL 33126**

7. Name and Address of New Registered Agent

Name **ERIC SOTO-HARRISON**

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

6073 NW 56 CIRCLE

City **CORAL SPRINGS**

FL

Zip Code

33067

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

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5/19/03

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	DP	<input type="checkbox"/> Delete
NAME	SOTO-HARRISON, ERIC	
STREET ADDRESS	5300 NW 124 WAY	
CITY-ST-ZIP	CORAL SPRINGS FL 33076	
TITLE	VPT	<input type="checkbox"/> Delete
NAME	BRULLARD, JACQUELINE L	
STREET ADDRESS	5300 N.W. 124 WAY	
CITY-ST-ZIP	CORAL SPRING FL 33076	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	RUIZ, SERGIO E	
STREET ADDRESS	210 NW 40 AVE	
CITY-ST-ZIP	MIAMI FL 33126	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP5	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ERIC SOTO-HARRISON	
STREET ADDRESS	6073 NW 56 CIRCLE	
CITY-ST-ZIP	CORAL SPRINGS, FL 33067	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	6073 NW 56 CIRCLE	
CITY-ST-ZIP	CORAL SPRINGS, FL 33067	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/19/03

Date

Daytime Phone #

CR2E034 (10/02)