


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

**FILED**  
03 OCT -6 PM 4:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # V43593

1. Entity Name  
Sanmar Construction Corp



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
911 Aduana

3. Mailing Address  
Suite, Apt. #, etc. \_\_\_\_\_

City & State  
Coral Gables FL

City & State  
\_\_\_\_\_  
Zip  
33146 Country \_\_\_\_\_

4. FEI Number  
65-0341230

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  
Juan P. Sanmartin

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

Coral Gables FL Zip Code 33146

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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 NAME STREET ADDRESS CITY-ST-ZIP	<u>P</u> <u>Juan Pedro San Martin</u> <u>911 Aduana</u> <u>Coral Gables FL 33146</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DVST</u> <u>Juan Pedro San Martin</u> <u>911 Aduana</u> <u>Coral Gables FL 33146</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>200023559132</u> <u>10/06/03--01005--014 **150.00</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Juan P. San Martin, VP Date: 9/30/03 Daytime Phone #: 305-794-3213

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)

11/13/03

September 30, 2003


Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302

To Whom It May Concern:

Enclosed is another copy of the Uniform Business Report for 2003. It was brought to our attention that your office had not received it this year. I know for certain that we sent it around March of this year. I remember I misplaced the envelope so I sent it to a Tallahassee address. Apparently it has been misplaced. I thought for sure that you had it on time since we filed it early this year and had no idea that you never received it.

I apologize for any inconvenience. Enclosed you will find a new UBR form as well as a check. Please call me if you have any questions or need anything else. Again, I apologize for the mix up.

Sincerely,



Juan P. San Martin  
VP