

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 27, 2006 08:00 AM
Secretary of State**

DOCUMENT # 640923

1. Entity Name
ELIZABETH GREEN CONSTRUCTION COMPANY



Principal Place of Business
**9155 SOUTH DADELAND BLVD., STE. 1812
MIAMI, FL 33156 US**

Mailing Address
**9155 SOUTH DADELAND BLVD., STE. 1812
MIAMI, FL 33156 US**



04142006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1951674

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**GREEN, ELIZABETH A ESQ
9155 SOUTH DADELAND BLVD.
SUITE 1812
MIAMI, FL 33156**

**DO NOT WRITE
IN THIS SPACE**

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME GREEN, ELIZABETH A
STREET ADDRESS 9155 SOUTH DADELAND BLVD., STE. 1812
CITY- ST- ZIP MIAMI, FL 33156

TITLE VPD
NAME GREEN, HERSCHEL V
STREET ADDRESS 9155 SOUTH DADELAND BLVD., STE. 1812
CITY- ST- ZIP MIAMI, FL 33156

TITLE VD
NAME GREEN, NANCY
STREET ADDRESS 9155 SOUTH DADELAND BLVD., STE. 1812
CITY- ST- ZIP MIAMI, FL 33156

TITLE S
NAME GRAD, SUSAN A
STREET ADDRESS 9155 SOUTH DADELAND BLVD., STE. 1812
CITY- ST- ZIP MIAMI, FL 33156

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

000000538045
05/09/06-80085-006 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Elizabeth A. Green, President

4/17/06 (305) 670-1000