

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2008 8:00 am
Secretary of State

02-01-2008 90029 014 ***150.00

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1. Entity Name
5TH AVENUE BUILDING INSPECTIONS, INC.



Principal Place of Business Mailing Address
7456 LIVERPOOL CT 7456 LIVERPOOL CT
BOYNTON BEACH, FL 33437 US BOYNTON BEACH, FL 33437 US

40016181



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01302008 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number
65-0976048

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CABALLERO, JOEY
7456 LIVERPOOL CT
BOYNTON BEACH, FL 33437

Name

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

City

FL

Zip Code

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, 2008 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME CABALLERO, JOEY
STREET ADDRESS 7456 LIVERPOOL CT
CITY-ST-ZIP BOYNTON BEACH, FL 33437

TITLE D ☐ Change ☒ Addition
NAME Jude Mackey
STREET ADDRESS 7456 Liverpool Ct.
CITY-ST-ZIP Boynton Bch. FL 33437

TITLE VP ☐ Delete
NAME CABALLERO, CATHY
STREET ADDRESS 7456 LIVERPOOL CT
CITY-ST-ZIP BOYNTON BEACH, FL 33437

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

TITLE D ☐ Delete
NAME MARTIN, RAY
STREET ADDRESS 7456 LIVERPOOL CT
CITY-ST-ZIP BOYNTON BEACH, FL 33437

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

TITLE D ☐ Delete
NAME STEFFEN, MICHAEL
STREET ADDRESS 7456 LIVERPOOL CT
CITY-ST-ZIP BOYNTON BEACH, FL 33437

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

TITLE D ☐ Delete
NAME BURGESS, THOMAS
STREET ADDRESS 7456 LIVERPOOL CT
CITY-ST-ZIP BOYNTON BEACH, FL 33437

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

1-30-08

Date

501-369-8363

Daytime Phone #