## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## DOCUMENT # P02000091614

1. Entity Namo

CUSTOM ARCHITECTURAL BUILDERS, INC.



## **FILED** Apr 17, 2007 8:00 am Secretary of State 04-17-2007 90050 027 \*\*\*150.00

SLVD .	

Principal Place of Business 3004-C SOUTH SOUTH OCEAN BLVD HIGHLAND BCH FL 33487-1885		Mailing Address 3004-C SOUTH SOUTH OCEAN BLVD HIGHLAND BCH FL 33487-1885								
2. Principal Place of Business - No P.O. Box #		3. Mailing Address								
Suite, Apl. #, etc.		Suite, Apt. #, etc.			1s	1st MOORE CR2E034 (10/06)				
City & State		City & State			4. FEI Numb	4. FEI Number 56-2293810			oplied For ot Applicable	
Zip	Country	Zip	Zip Country		5. Certificate	of Status Desired	\$0.75		ditional	
6. Name and Address of Current Registered Agent					7. Name and	d Address of New Re				
				Namo						
KROMER, CAROL L 3004-C SOUTH SOUTH OCEAN BLVD HIGHLAND BCH FL 33487-1885				Street Add	Street Address (P.O. Box Number is Not Acceptable)					
			City		<del></del>	FL	Zip Cod	e		
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. (NO	OTE, Registere	a Agent signature	required when reinstaling)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State					9. Election Campaig Trust Fund Contr	•	<u> </u>	00 May Be ed to Fees		
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 11	
NAME KROMER, CAROL L SIREET ADDRESS 3004-C SOUTH SOUTH OCEAN BLVD STORET ADDRESS SOUTH SOUTH OCEAN BLVD				i				☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	VPE KROMER, JOHN W JR. 3004-C S. OCEAN BLVD. HIGHLAND BEACH FL 33487							Change	Addition	
TITLE NAMF STREET ADDRESS CITY-ST-ZIP	VPC DE LUCA, HENRY 724 SW 7TH AVE HOLLANDALE FL 33009	Delete						Change	Addition	
TITLE NAME STREET ADDRESS CUTY-ST-ZIP		☐ Dolete		I .				☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-71P		☐ Delete		I .				☐ Change	Addition	
IIILE Name Street address City-St-Zip	F	☐ Delete		J				☐ Change	Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 attemption with an address, with all other like empowered.

**SIGNATURE:**