

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000068055

FILED  
Jun 17, 2009  
Secretary of State

Entity Name: BENJAMIN'S CONSTRUCTION, INC.

**Current Principal Place of Business:**

1080 S. HOAGLAND BLVD., L-156  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

1080 S. HOAGLAND BLVD., L-156  
KISSIMMEE, FL 34741

**New Mailing Address:**

FEI Number: 20-1068583      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALL ABOUT FINANCE AND MORE, LLC  
1633 E VINE ST  
SUITE 216  
KISSIMMEE, FL 34743 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MENDIOLA, BENJAMIN  
Address: 1080 S. HOAGLAND BLVD., L-156  
City-St-Zip: KISSIMMEE, FL 34741

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BENJAMIN MENDIOLA

PRES

06/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date