

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000116777

FILED  
Apr 29, 2007  
Secretary of State

Entity Name: AIOSSA CONSTRUCTION, INC.

**Current Principal Place of Business:**

41 FAIRCHILD STREET  
BABSON PARK, FL 33827

**New Principal Place of Business:**

**Current Mailing Address:**

41 FAIRCHILD STREET  
BABSON PARK, FL 33827

**New Mailing Address:**

FEI Number: 20-3232839      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

AIOSSA, NICHOLAS L  
41 FAIRCHILD STREET  
BABSON PARK, FL 33827      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: AIOSSA, NICHOLAS L  
Address: 41 FAIRCHILD STREET  
City-St-Zip: BABSON PARK, FL 33827

Title: TD ( ) Delete  
Name: BLACK, CHARLES P  
Address: 41 FAIRCHILD STREET  
City-St-Zip: BABSON PARK, FL 33827

Title: SD ( ) Delete  
Name: AIOSSA, KELLY  
Address: 41 FAIRCHILD STREET  
City-St-Zip: BABSON PARK, FL 33827

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

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

Title: TD (X) Change ( ) Addition  
Name: DENNIS, ZEIGLER  
Address: 41 FAIRCHILD STREET  
City-St-Zip: BABSON PARK, FL 33827

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: NICHOLAS L AIOSSA

PD

04/29/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date