


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # S16977
 1. Entity Name
MAYPE CONSTRUCTION CORP.



Principal Place of Business Mailing Address
1441 S.W. 139TH AVE. **1441 S.W. 139TH AVE.**
MIAMI, FL 33184 **MIAMI, FL 33184**

DO NOT WRITE IN THIS SPACE



04152006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
65-0231029 Not Applicable

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

6. Name and Address of Current Registered Agent
DOGER, PEDRO
1441 S.W. 139TH AVE.
MIAMI, FL 33184

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title is applicable NOTE: Registered Agent signature required when renaming)

FILE NOW!!! FEE IS \$150.00 8. Election Campaign Financing **\$5.00 May Be**
After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. **Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	PSD DOGER, PEDRO 1441 S.W. 139TH AVE. MIAMI, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VTD DOGER, MAYRA 1441 S.W. 139TH AVE. MIAMI, FL
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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 05/11/06-80001-013 150.00

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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 an other like empowered.

SIGNATURE: *x Pedro Doger* 4/15/06 305-972-3163
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #