

2005 FOR PROFIT CORPORATION ANNUAL REPORT

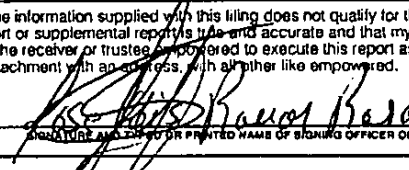
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000111914 1. Entity Name EXPRESS CONSTRUCTION OF SARASOTA INC.					
Principal Place of Business 8439 BRANDIS CIRCLE EAST SARASOTA, FL 34243			Mailing Address 8439 BRANDIS CIRCLE EAST SARASOTA, FL 34243		
2. Principal Place of Business 353 BRAOEN AVE		3. Mailing Address Suite, Apt. #, etc.			
City & State SARASOTA		City & State			
Zip 34243		Country MANATEE		Zip 34243	
4. FEI Number		☒ Applied For ☐ Not Applicable			
5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145			7. Name and Address of New Registered Agent 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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 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 NAME STREET ADDRESS CITY-ST-ZIP	PD ROSAS RAMOS, EFRAIN 8439 BRANDIS CIRCLE EAST SARASOTA, FL 34243 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT JOSE LUIS ROSAS-RAMOS 353 BRAOEN AVE SARASOTA 34243 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ROSAS RAMOS, JOSE L 8439 BRANDIS CIRCLE EAST SARASOTA, FL 34243 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT ORLANDO CERRATO 2415 FLORIDA ST SARASOTA 34231 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROSAS RAMOS, RUBEN 8439 BRANDIS CIRCLE EAST SARASOTA, FL 34243 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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: 			Date: 2-15-05 Daytime Phone: 941-359-8535		