

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # M43814

1. Entity Name
E & F CONTRACTORS, INC.



Principal Place of Business
**12201 SW 129TH COURT
MIAMI, FL 33186**

Mailing Address
**12201 SW 129TH COURT
MIAMI, FL 33186**



03212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2751030

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fees Required

6. Name and Address of Current Registered Agent

**EFRAIN, FONSECA
15265 S.W. 156TH TERR
MIAMI, FL 33187**

**DO NOT WRITE
IN THIS SPACE**

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

Signat. e.c. typed or printed name of registered agent and fee if applicable

(FIC 1): Registered Agent signature required when reinstating

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**PDS
FONSECA, EFRAIN
15265 SW 156TH TERR
MIAMI, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**STD
FONSECA, BERNICE
15265 SW 156TH TERR
MIAMI, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

U00000482427
04/11/06-80073-023 158.75

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bernice Fonseca
Bernice Fonseca
Vice-president

03-22-06

DATE

3052551674

Anytime phone #