

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90096 002 ***150.00

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03052007 Chg-P CR2E034 (12/06)

DOCUMENT # P05000145268					
1. Entity Name VILLE CONSTRUCTION, INC					
Principal Place of Business 1555 FAIRCHILD ST PENSACOLA, FL 32504			Mailing Address 1555 FAIRCHILD ST PENSACOLA, FL 32504		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-3720888	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RODRIGUEZ-HERNANDEZ, VICTOR 1555 FAIRCHILD ST PENSACOLA, FL 32504				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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	P RODRIGUEZ-HERNANDEZ, VICTOR 1555 FAIRCHILD ST PENSACOLA, FL 32504 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP CELIA TISCAREÑO GARCIA ☐ Change ☒ Addition 1555 FAIRCHILD ST. PENSACOLA, FL 32504		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP RODRIGUEZ-MARTINEZ, VICTOR ☒ Delete 1555 FAIRCHILD ST PENSACOLA, FL 32504	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SANTOS-PASTORA, CRESENCIO ☒ Delete 1555 FAIRCHILD ST PENSACOLA, FL 32504	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 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 all other like empowered.					
SIGNATURE: 		3-5-2007 (850) 698-3223			
SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			