2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000009443

1. Entity Name

"WILDON BUILDERS AND CONTRACTORS INCORPORATED"

FILED Jan 09, 2008 08:00 AN Secretary of State

Principal Place of Business

1568 N.E. QUAYSIDE TERR MIAMI, FL 33138 US Mailing Address

1568 N.E. QUAYSIDE TERR MIAMI, FL 33138 US



DO NOT WRITE IN THIS SPACE

	No	42008	01	No Chg	-P		Ç	R2E	034	(1	1/0	5)		
4 EEL Number Applie			4						_	-		Apr	dio.	_

59-3223122 Not Applicable

5. Certificate of Status Desired Sandard Fee Required

6. Name and Address of Current Registered Agent

KAFKA, DONALD L 1568 N.E. QUAYSIDE TERRACE MIAMI, FL 33138

DO NOT WRITE IN THIS SPACE

8. The above the obligat	e named entity submits this statement for the p tions of registered agent.	urpose of changing its register	ed office or re		oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registere	id Agent signature	required when reinstaling)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			The state of the s
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAFKA, DONALD L 1568 N.E. QUAYSIDE TERRACE MIAMI, FL 33138			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	U00000776163
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAFKA, WILMA M 1568 N.E. QUAYSIDE TERRACE MIAMI, FL 33138		,		01/09/03-80013-021 150.00 %
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE Name Street address City-St-Zip					THIS SPACE
TITLE NAME STREET ADDRESS					

12. It 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.

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CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

nace	χ.	MARCA DONALD L. KAFKA
GNATURE AND TYP	ED OR PRI	NTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/08 305-891-315