

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000044773

**Entity Name:** S.A.B. CONTRACTING SERVICES, INC.

**Current Principal Place of Business:**

9239 SW 227ST # 27  
CUTLERBAY, FL 33190

**Current Mailing Address:**

9239 SW 227ST #27  
CUTLERBAY, FL 33190 US

**FEI Number:** 01-0676087

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BUADE, JUAN CPRES  
9239 SW 227ST  
#27  
CUTLERBAY, FL 33190 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name BUADE, JUAN CPRE  
Address (239 SW 227ST #27  
City-State-Zip: CUTLERBAY FL 33190

Title V  
Name BUADE, JUAN C  
Address 9239 SW 227ST #27  
City-State-Zip: CUTLERBAY FL 33190

Title ST  
Name BUADE, JUAN C  
Address 9239 SW 227ST #27  
City-State-Zip: CUTLERBAY FL 33190

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** JUAN C BUADE

**PRESIDENT**

**01/09/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date