

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000074134

**FILED**  
**Apr 15, 2016**  
**Secretary of State**  
**CC7063050366**

**Entity Name:** AZEREDO CONSTRUCTION INC.

**Current Principal Place of Business:**

702 SE ELWOOD AVE  
PORT SAINT LUCIE, FL 34983

**Current Mailing Address:**

PO BOX 8805  
PORT SAINT LUCIE, FL 34985 US

**FEI Number:** 46-0905316

**Certificate of Status Desired:** No

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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/VP  
Name AZEREDO, DJ  
Address 362 LAKEHURST DRIVE  
City-State-Zip: PORT SAINT LUCIE FL 34983

Title S/T  
Name AZEREDO, DJ  
Address 362 LAKEHURST DRIVE  
City-State-Zip: PORT SAINT LUCIE FL 34983

Title D  
Name AZEREDO, DJ  
Address 362 LAKEHURST DRIVE  
City-State-Zip: PORT SAINT LUCIE FL 34983

Title OFFICER  
Name MOORE, JEFFREY DAVID  
Address 5807 NW FALL FLOWER CT.  
City-State-Zip: PORT SAINT LUCIE FL 34986

*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:** DJ AZEREDO

**PRESIDENT**

**04/15/2016**

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

\_\_\_\_\_  
Date