


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # 345655 1. Entity Name RONCO BUILDING, CORP.	
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Principal Place of Business 4801 E. 8TH AVE., #7 HIALEAH, FL 33013-2058	Mailing Address 440 N.W. 132 AVE. MIAMI, FL 33182 US
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01172008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1265983	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PONCE DE LEON, TERESA
440 N.W. 132 AVE.
MIAMI, FL 33182

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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, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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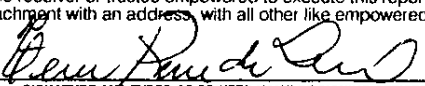
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PONCE DE LEON, EDUARDO 440 N.W. 132 AVE. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PONCE DE LEON, MARIA J 440 NW 132 AVENUE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PONCE DE LEON, TERESA 440 NW 132 AVENUE MIAMI, FL
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05/16/08-80032-005 158.75

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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:  **1-15-08** **(305) 553 2060**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #