2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 478475

FILED Jan 21, 2009 Secretary of State

Entity Name: CONSTRUCTION SPECIALTY SALES, INC.

urrent F	Principal Place	of Business:	New Principal Place	of Business:
371 SW IIAMI, FL				
urrent N	lailing Addres	s:	New Mailing Addres	ss:
371 SW IIAMI, FL				
El Number	: 59-1623818	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
lame and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
371 S.Ŵ	GABRIEL . 156 ST.			
/IAMI, FL	33157 US			
		submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
he above	e named entity s e of Florida. RE:			ed office or registered agent, or both,
the above the Stat	e named entity s e of Florida. RE:Electror	ic Signature of Registered Ag		ed office or registered agent, or both, Date
he above the Stat SIGNATU	e named entity se of Florida. RE:Electron mpaign Financins	ic Signature of Registered Ag	ent	Date
he above the Stat SIGNATU	e named entity s e of Florida. RE:Electror	ic Signature of Registered Ag	ent	
he above the Stat SIGNATU	e named entity se of Florida. RE: Electror mpaign Financing S AND DIREC	ic Signature of Registered Agg Trust Fund Contribution (). TORS: Delete IEL F	ent	Date
he above the State SIGNATU lection Ca DFFICER ittle: ame: ddress:	e named entity se of Florida. RE: Electron mpaign Financing S AND DIREC VS () BIFANO, GABR 7371 SW 156 S MIAMI, FL	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete IEL F ST Delete NE L	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JEANNE L. BIFANO PT 01/21/2009