2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 546997

1. Entity Name

SPACE BUILDERS AND PLANNERS, INC.



FILED Apr 02, 2008 08:00 AN Secretary of State

Principal Place of Business

5006 AUTHUR STREET HOLLYWOOD, FL 33021

Mailing Address

5006 AUTHUR STREET HOLLYWOOD, FL 33021



02282008

No Chg-P

CR2E034 (11/05)

4. FE! Number 59-1765104

Applied For Not Applicable

5. Certificate of Status Desired

8

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

OPSTAL,GERARD 965 NW 132ND ST NORTH MIAMI, FL 33168

DO NOT WRITE IN THIS SPACE

NORTH M	IAMI, FL 33168			IN	THIS SPA	ICE.	
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			ed Agent signature	ent signature required when reinstating) DATE			
	E NOW!!! FEE IS \$150.00 by 1, 2008 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.		\$5.00 May Be Added to Fees	04/14/08)877949 -80035-015	158.75
10.	OFFICERS AND DIREC	TORS	11	计。因为一种建			Mitter.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD OPSTAL, GERARD 965 NW 132ND ST NORTH MIAMI, FL						
NAME STREET ADDRESS CITY-S1-ZIP	SD OPSTAL, NEL 965 NW 132ND ST NORTH MIAMI, FL						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T OPSTAL, MARCEL G 975 NW 132 STR NO MIAMI, FL			DO	NOT WI	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V OPSTAL, MAURICE A 975 NW 132 STR NO MIAMI, FL			IN	THIS SP	ACE	
TITLE NAME STREET ADDRESS CIFY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information							

12. I rereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of 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 chapter 607, or on an attachment with an address, with all other like ampowered.

SIGNATURÉ

NATURE AND TYPED OR PRINTED HAVE OF SIGNING OFFICE

<u>Gerar</u>

PSTOL March

Davtme Phone #