2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 854262

FILED Feb 05, 2008 Secretary of State

Entity Name: CONSTRUCTION SPECIALISTS OF AMERICA, INC.

unent P	rincipal Place o	n Dusilless.	New Principal Place	of Business.
	ST STREET ELD, MI 48034	US		
urrent M	ailing Address	:	New Mailing Addres	es:
	ST STREET ELD, MI 48034	US		
El Number:	38-2420756	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	Address of Cu	rrent Registered Agent:	Name and Address of	of New Registered Agent:
	MICHAEL D HEKINAH PLACI	=		
	FL 32071 US			
)'BRIEN, I he above	FL 32071 US	3	ourpose of changing its registere	ed office or registered agent, or both,
)'BRIEN, I he above	FL 32071 US named entity su e of Florida.	3	ourpose of changing its registere	ed office or registered agent, or both,
he above the State	FL 32071 US named entity su of Florida. RE:	3		ed office or registered agent, or both, Date
b'BRIEN, I The above In the State	named entity sue of Florida. RE: Electronic	s ubmits this statement for the p		
he above the above the State GNATUF	named entity sue of Florida. RE: Electronic	Submits this statement for the personal statemen	ent	
b'BRIEN, In the above in the State SIGNATUR Clection Car DFFICERS itte: lame: ddress:	named entity sue of Florida. RE: Electronic npaign Financing	Siphature of Registered Agricust Fund Contribution (). ORS: Delete M J,	ent	Date
he above the above the State GNATUF	named entity sue of Florida. RE: Electronic npaign Financing S AND DIRECT P () E KUCZEK, WILLIA 5492 SHARP DR HOWELL, MI	c Signature of Registered Agrust Fund Contribution (). ORS: Delete LM J, VE Delete ERIC E, DRIVE	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: NANCY EARHART CONT 02/05/2008