2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006 08:00 AM
Secretary of State

DOCUMENT # F02000001137

1. Entity Name
VERDERAME CONSTRUCTION CO., INC.

Principal Place of Business	Mailing Address
10-40 BORDEN AVENUE LONG ISLAND CITY, NY 11101	1181 SOUTH ROGERS CIRCLE STE 31 BOCA RATON, FL 33487

DO NOT WRITE IN THIS SPACE

01262006 No Chg-P CR2E034 (11/05)

4. FEI Number
13-2578835

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

VERDERAME, ANTHONY
1181 SOUTH ROGERS CIRCLE
STE 31
BOCA RATON, FL 33487

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	VERDERAME, ANTHONY
STREET ADDRESS	15948 D'ALENE DRIVE
CITY-ST-ZIP	DEL RAY BEACH, FL 33446
TITLE	V
NAME	VERDERAME, MARK
STREET ADDRESS	15948 D'ALENE DRIVE
CITY-ST-ZIP	DEL RAY BEACH, FL 33446
TITLE	ST
NAME	VERDERAME, JOANNA
STREET ADDRESS	15948 D'ALENE DRIVE
CITY-ST-ZIP	DEL RAY BEACH, FL 33446
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 _____ 3/13/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

Daytime Phone #