


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 19, 2008 08:00 AM
Secretary of State

DOCUMENT # F02000001137 1. Entity Name VERDERAME CONSTRUCTION CO., INC.	
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Principal Place of Business 601 N CONGRESS AVENUE #302 DELRAY BEACH, FL 33445	Mailing Address 601 N CONGRESS AVENUE SUITE 302 DELRAY BEACH, FL 33445
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DO NOT WRITE IN THIS SPACE



02012008 No Chg-P CR2E034 (11/05)

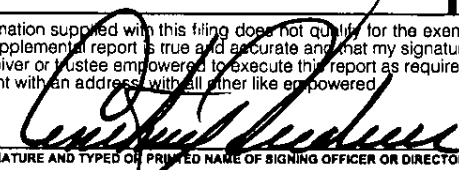
4. FEI Number 13-2578835	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent VERDERAME, ANTHONY 601 N CONGRESS AVENUE SUITE 302 DELRAY BEACH, FL 33445

DO NOT WRITE IN THIS SPACE

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	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
	000000832838 02/27/08-80074-012 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES VERDERAME, ANTHONY 15948 D'ALENE DRIVE DEL RAY BEACH, FL 33446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VERDERAME, MARC 15948 D'ALENE DRIVE DEL RAY BEACH, FL 33446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST VERDERAME, JOANNA 15948 D'ALENE DRIVE 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	

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: 	2/11/08 Date Daytime Phone #