

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001235

Entity Name: STEADFAST BUILDERS, INC.

FILED
Apr 25, 2006
Secretary of State

Current Principal Place of Business:

285 MARIETTA AVE
HAWTHORNE, NY 105321909 US

New Principal Place of Business:

PO BOX 273
HAWTHORNE, NY 105320273 US

Current Mailing Address:

857 SW MUNJACK CV
SAINT LUCIE WEST, FL 349863456 US

New Mailing Address:

FEI Number: 13-3577590

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANGIELLO, JAMES S
857 SW MUNJACK CV
SAINT LUCIE WEST, FL 349863456 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, D () Delete
Name: ANGIELLO, DOMENICK
Address: 285 MARIETTA AVE.
City-St-Zip: HAWTHORNE, NY 10532

Title: V, D () Delete
Name: ANGIELLO, JOSEPH A
Address: 5 CARPENTER PL
City-St-Zip: YORKTOWN HEIGHTS, NY 10598

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DOMENICK ANGIELLO

P

04/25/2006

Electronic Signature of Signing Officer or Director

Date