

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002714

FILED
Mar 23, 2009
Secretary of State

Entity Name: PALEEN CONSTRUCTION CORP.

Current Principal Place of Business:

MILL POND OFFICES
293 ROUTE 100, SUITE 208
SOMERS, NY 10589

New Principal Place of Business:

Current Mailing Address:

MILL POND OFFICES
293 ROUTE 100, SUITE 208
SOMERS, NY 10589

New Mailing Address:

FEI Number: 13-2578660 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GIGLIOTTI, PASQUALE
4895 WEST BONANZA DRIVE
BEVERLY HILLS, FL 34465 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 (X).

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: GIGLIOTTI, PASQUALE T
Address: 1515 CROTON LAKE ROAD
City-St-Zip: YORKTOWN HEIGHTS, NY 10598

Title: VDD () Delete
Name: GIGLIOTTI, PATRICK J
Address: 1169 ROUTE 376 OAD
City-St-Zip: WRAPPINGERS FALLS, NY 12590

Title: VDD () Delete
Name: GIGLIOTTI, KATHLEEN
Address: 1515 CROTON LAKE ROAD
City-St-Zip: YORKTOWN HEIGHTS, NY 10598

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VDD (X) Change () Addition
Name: GIGLIOTTI, PATRICK J
Address: 1169 ROUTE 376 ROAD
City-St-Zip: WRAPPINGERS FALLS, NY 12590

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

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: PASQUALE GIGLIOTTI

PCD

03/23/2009

Electronic Signature of Signing Officer or Director

_____ Date