

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 23, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # F03000004454

1. Entity Name

~~DENSHAW, INC.~~ *Coleman Construction, Inc.*



Principal Place of Business

1973W 48TH ST  
LOS ANGELES, CA 90062-2104

Mailing Address

1973W 48TH ST  
LOS ANGELES, CA 90062-2104

**POSTED**  
*1/09/07*



01052007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
91-1943147

Applied For  
Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

MITCHELL, ADRIAN  
210 S. GOLFCOURSE RD.  
HURLBURT FIELD, FL 32544

**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

*Adrian Mitchell*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

*1/16/07*

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U00000676997  
03/30/07-80086-010 158.75

10. OFFICERS AND DIRECTORS

TITLE P  
NAME COLEMAN, SHARON  
STREET ADDRESS 1973W 48TH ST  
CITY-ST-ZIP LOS ANGELES, CA 900622104

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

**POSTED**

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IN THIS SPACE**

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 of this report, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Sharon Coleman*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**SIGN  
HERE**