

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90179 026 \*\*\*150.00

<b>DOCUMENT # F94241</b> 1. Entity Name <b>JEFRA CONSTRUCTION INC.</b>			
Principal Place of Business <b>21242 S.W. 125 PATH MIAMI, FL 33177</b>		Mailing Address <b>21242 S.W. 125 PATH MIAMI, FL 33177</b>	
2. Principal Place of Business - No P.O. Box # <b>18018 SW 154 CT.</b>		3. Mailing Address <b>18018 SW 154 CT.</b>	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State <b>MIAMI, FL</b>		City & State <b>MIAMI, FL</b>	
Zip <b>33187</b>		Zip <b>33187</b>	
Country <b>USA</b>		Country <b>USA</b>	
4. FEI Number <b>59-2206945</b>		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  <b>DOMINGUEZ, JESUS 21242 S.W. 125 PATH MIAMI, FL 33177</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>18018 SW 154 CT.</b> City <b>MIAMI</b> FL <b>FL</b> Zip Code <b>33187</b>	
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.</small>		DATE <b>4/16/07.</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOMINGUEZ, JESUS 21242 S.W. 125 PATH MIAMI, FL 33177	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOMINGUEZ, JESUS 18018 SW 154 CT. MIAMI, FL 33187
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DOMINGUEZ, FELICIA 21242 S.W. 125 PATH MIAMI, FL 33177	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DOMINGUEZ, FELICIA 18018 SW 154 CT. MIAMI, FL 33187
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DOMINGUEZ, ERNESTO 21242 S.W. 125 PATH MIAMI, FL 33177	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DOMINGUEZ, ERNESTO 18018 SW 154 CT. MIAMI, FL 33187
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete
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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		DATE <b>4/17/07</b> <small>Date Daytime Phone #</small>	