

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # F95058	
1. Entity Name FLORIDA T.B. CONSTRUCTION, INC.	

Principal Place of Business 9192 CORAL WAY STE 201 MIAMI, FL 33165 US	Mailing Address 9192 CORAL WAY STE 201 MIAMI, FL 33165 US
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03102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2206042	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BALSERA, TOMAS JR. 350 SW 133RD CT MIAMI, FL 33184

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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 *Caridad Balsera* Caridad Balsera president 3/27/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when running) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BALSERA, CARIDAD 350 SW 133RD CT MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST BALSERA ORTA, CARMEN 350 SW 133 CT MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP BALSERA, TOMAS JR 350 SW 133 CT MIAMI, FL 33184
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04/18/06-80019-001 150.00

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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 *Caridad Balsera* (president) Caridad Balsera 3/27/06 (305) 592
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #