## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

of the corporation or the rocol if changed, or on an attaching

SIGNATURE:

## DOCUMENT # G90380 Jan 22, 2007 08:00 AM 1. Entity Namo **Secretary of State** WAREHAM CONSTRUCTION, INC. Principal Place of Business Mailing Address 10277 NW 46TH STREET SUNRISE FL 33351 10277 NW 46TH STREET SUNRISE FL 33351 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State Applied For City & State 4. FEI Number 59-2356224 Not Applicable Zio Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WAREHAM, THOMAS J Street Address (P.O. Box Number is Not Acceptable) 10277 NW 46TH ST FT LAUDERDALE FL 33351 City Zip Code 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 Signature, typed or printed name of registered agent and tale it applicable. DATE (NOTE: Registered Agent signature required when reinstation) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Delete ☐ Change 1000 mir ☐ Addition WAREHAM, THOMAS J NAMI' NAMI U000000597101 10277 NW 46 ST 01/24/07-80022-021 150.00 STREET ADORESS STRUCT ADDRESS SUNRISE FL 33351 CBY-ST-7/P CHY-ST-ZIP 11111 ☐ Defete ☐ Change Addition WAREHAM, THOMAS M NAME 14500 SW 18 CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DAVIE FL 33351** CHY-SI-7P MILE □ Change ☐ Addition ☐ Delete 11916 WAREHAME, JONATHAN D NAM NAMI 14500 SW 18 CT STREET ADDRESS STREET ADDRESS DAVIE FL 33325 CHY-SI-7/P CHY-SI-7IP IUH. Delete ☐ Addition NAMI" NAMI STOLL! ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Delete Addition HILE DBH Change NAME NAMI STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-71P Addition HITE Delete TILLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 logal offect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted employeed to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11

THOMAS J. WAREHAM 1/18/07

FILED