


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 08:00 A
Secretary of State

DOCUMENT # J57168	
1. Entity Name EPIC CONSTRUCTION, INC.	

Principal Place of Business 6845 S.W. 144 STREET VILLAGE OF PALMETTO BAY, FL 33158	Mailing Address 6845 S.W. 144 STREET VILLAGE OF PALMETTO BAY, FL 33158
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04302007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0035587	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HERNANDEZ, RITA K 11705 SW 69 AVENUE PINECREST, FL 33156

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/07

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HERNANDEZ, RITA K 11705 SW 69 AVE PINECREST, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HERANANDEZ, MIRELLA I 6845 SW 144 ST PALMETTO BAY, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HERNANDEZ, MIGUEL JR 6845 SW 144 ST PALMETTO BAY, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HERNANDEZ, MIRELLA I 6845 SW 144 ST PALMETTO BAY, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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05/25/07-80056-014 158.75

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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 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Rita Hernandez 4/30/07 (305) 971-7811 (305) 479-1005