

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K04819

FILED  
Jan 10, 2005  
Secretary of State

**Entity Name:** TOMAS LUIS BUILDING CONTRACTOR, INC.

**Current Principal Place of Business:**

15821 SW 147 AVE.  
MIAMI, FL 33177

**New Principal Place of Business:**

**Current Mailing Address:**

15821 SW 147 AVE.  
MIAMI, FL 33177

**New Mailing Address:**

**FEI Number:** 65-0015976      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CATCHUSIFYOUCAN, INC.  
10121 SW 40 STREET  
MIAMI, FL 33165 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LUIS, MANUEL  
Address: 15821 SW 147 AVE.  
City-St-Zip: MIAMI, FL 33177

Title: S ( ) Delete  
Name: CALZADILLA, RAUL,  
Address: 7560 SW 104 STREET  
City-St-Zip: MIAMI, FL 33176

Title: VP ( ) Delete  
Name: LUIS, HILDA  
Address: 15821 SW 147 AVE  
City-St-Zip: MIAMI, FL 33177

Title: T ( ) Delete  
Name: LUIS, TOMAS  
Address: 15821 SW 147 AVE.  
City-St-Zip: MIAMI, FL 33177

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANUEL LUIS

P

01/10/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date