

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K06767

FILED
May 04, 2012
Secretary of State

Entity Name: SALAS CARPENTRY CONTRACTOR, INC.

Current Principal Place of Business:

% MICHAEL A. SALAS
10929 CHILDERS ST.
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

MICHAEL A. SALAS
10929 CHILDERS ST.
BONITA SPRINGS, FL 34135 US

Current Mailing Address:

% MICHAEL A. SALAS
10929 CHILDERS ST.
BONITA SPRINGS, FL 34135 US

New Mailing Address:

MICHAEL A. SALAS
10929 CHILDERS ST.
BONITA SPRINGS, FL 34135 US

FEI Number: 65-0021095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALAS, MICHAEL A.
10929 CHILDERS ST.
BONITA SPRINGS, FL 34135 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

OFFICERS AND DIRECTORS:

Title: D
Name: SALAS, MICHAEL A.
Address: 10929 CHILDERS ST.
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: SALAS, MARGARET L.
Address: 10929 CHILDERS ST.
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: SALAS, MICHAEL A JR
Address: 27445 ELWOOD DR.
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: SALAS, MELISSA K
Address: 27445 ELWOOD DR.
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL A. SALAS

D

05/04/2012

Electronic Signature of Signing Officer or Director

Date