2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# K33071

Entity Name: L.A.B. CONSTRUCTION CO.

Current Principal Place of Business:

% BASILIO L. ALPIZAR
5220 NW 4 TER
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

% BASILIO L. ALPIZAR
5220 NW 4 TER
MIAMI, FL 33126

New Mailing Address:

FEI Number: 65-0074199 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ALPIZAR, BASILIO L.
5220 NW 4 TER
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

ALPIZAR, BASILIO L
5220 NW 4 TER
MIAMI, FL 33126 US

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: BASILIO L. ALPIZAR 04/28/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: ALPIZAR, BASILIO L.,
Address: 5220 NW 4 TER
City-St-Zip: MIAMI, FL 33126

Title: DS ( ) Delete
Name: MABEL, ALAMINA A
Address: 5220 N.W. 4 TERRACE
City-St-Zip: MIAMI, FL 33126

Title: DT ( ) Delete
Name: ALPIZAR, MARTHA C
Address: 5220 NW 4 TERRACE
City-St-Zip: MIAMI, FL 33126

Title: DVP ( ) Delete
Name: GUTIERREZ, PEDRO
Address: 5220 NW 4 TERRACE
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: ALPIZAR, BASILIO L
Address: 5220 NW 4 TER
City-St-Zip: MIAMI, FL 33126

Title: DS (X) Change ( ) Addition
Name: ALAMINA, MABEL A
Address: 5220 N.W. 4 TERRACE
City-St-Zip: MIAMI, FL 33126

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

Title: DVP (X) Change ( ) Addition
Name: ALAMINA, ALBERTO A
Address: 5220 NW 4 TERRACE
City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MABEL A. ALAMINA DS 04/28/2008
Electronic Signature of Signing Officer or Director Date