## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# K55250

Entity Name: SOUTH FLORIDA MATERIALS CORP.

FILED Sep 05, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
% JOHN DEFREHN 101 SANSBURY'S WAY W PALM BEACH, FL 334113670				300 MIDDLE ROAD PORT OF PALM BEACH RIVERA BEACH, FL 33404			
Current Mailing Address:				New Mailing Address:			
% JOHN DEFREHN 101 SANSBURY'S WAY W PALM BEACH, FL 334113670				C/O L.L. GWINN P.O. BOX 2438 BECKLEY, WV 25802			
FEI Number	: 59-2028759	FEI Number Applied For ( )	FEI Nur	nber Not Appl	licable ( )	Certificate of Status	Desired ( )
Name and	d Address of C	urrent Registered Agent:		Name and	Address of	New Registered A	gent:
WEST PA	BURY'S WAY LM BEACH, FL	. 33416 US submits this statement for the pu	ırpose c	of changing i	ts registered	office or registered	agent, or both,
	e of Florida.	······································			· - <b>9</b>		,
SIGNATUI							
	Electron	ic Signature of Registered Agen	ıt			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip:	D/P ( ) VECELLIO, LEG 101 SANSBUR' W PALM BEAC	Y'S WAY		Title: Name: Address: City-St-Zip:	VECELLIO, L 101 SANSBUI		
Title: Name: Address: City-St-Zip:	ST () DEFREHN, JOH 101 SANSBUR' W PALM BEAC	r'S WAY		Title: Name: Address: City-St-Zip:	GWINN, L. L	X) Change ( ) Addition T C. BYRD DRIVE V 25801	
Title: Name: Address: City-St-Zip:	VECELLIO, CHI 101 SANSBUR			Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BASHAW, DAVI			Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VECELLIO, KA <sup>1</sup> 101 SANSBUR			Title: Name: Address: City-St-Zip:	VECELLIO, K 101 SANSBUI		
Title: Name:	VP/D () VECELLIO, MIC			Title: Name:	(	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: L.L. GWINN ST 09/05/2006

City-St-Zip: WEST PALM BEACH, FL 33411