

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000117893

FILED
Aug 25, 2007
Secretary of State

Entity Name: CONSTRUCTION PLANS & PERMITS, LLC

Current Principal Place of Business:

10749 DERRINGER DR
ORLANDO, FL 32829

New Principal Place of Business:

10749 DERRINGER DR
ORLANDO, FL 32829 US

Current Mailing Address:

10749 DERRINGER DR
ORLANDO, FL 32829

New Mailing Address:

10749 DERRINGER DR.
ORLAND, FL 32829 US

FEI Number: 20-3913717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LOPEZ, ANTONIO J JR.
10749 DERRINGER DR
ORLANDO, FL 32829 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LOPEZ, ANTONIO J JR
Address: 10749 DERRINGER DR
City-St-Zip: ORLANDO, FL 32829

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LOPEZ, ANTONIO J JR
Address: 10749 DERRINGER DR
City-St-Zip: ORLANDO, FL 32829 US

Title: MGRM () Change (X) Addition
Name: MALDONADO, MARISOL
Address: 10749 DERRINGER DR.
City-St-Zip: ORLANDO, FL 32829 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANTONIO J. LOPEZ JR.

MGR

08/25/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date