## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# L31691

FILED Mar 08, 2006 Secretary of State

Entity Name: CONSTRUCTION FABRICATION SERVICES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

6349 PONTIAC LANE 1114 CAMPBELL ST

NORTH PORT, FL 34287 PORT CHARLOTTE, FL 33953

**Current Mailing Address: New Mailing Address:** 

6349 PONTIAC LANE 1114 CAMPBELL ST

NORTH PORT, FL 34287 PORT CHARLOTTE, FL 33953

FEI Number: 65-0127302 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KLINKHAMMER, RICHARD M KLINKHAMMER, RICHARD M 6349 PONTIAC LANE 1114 CAMPBELL ST

NORTH PORT, FL 34287 PORT CHARLOTTE, FL 33953 US 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: 03/08/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

GARLICK, BARBARA A GARLICK, BARBARA A Name: Name: 6349 PONTIAC LANE 6349 PONTIAC LANE Address: Address: City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: NORTH PORT, FL 34287

( ) Delete Title: Title: (X) Change ( ) Addition Name: KLINKHAMMER, RICHARD M Name: KLINKHAMMER, RICHARD M 4443 LOS RIOS ROAD 1114 CAMPBELL ST Address: Address: NORTH PORT, FL 34287 PORT CHARLOTTE, FL 33953 City-St-Zip:

Title: Title: ( ) Change (X) Addition () Delete Name: LANGMAN, SANDRA L Name:

1114 CAMPBELL ST Address: Address: City-St-Zip: City-St-Zip: PORT CHARLOTTE, FL 33953

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.

SIGNATURE: SANDRA L LANGMAN 03/08/2006 S