

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2006 8:00 am
Secretary of State

06-30-2006 90001 001 ***158.75

DOCUMENT # L57652					
1. Entity Name DESIGN CONSTRUCTION & REMODELING, INC.					
Principal Place of Business C/O RONALD XAVIER DE FRANCISCO JR. 5810 NW 12 CT SUNRISE, FL 33313			Mailing Address C/O RONALD XAVIER DE FRANCISCO JR. 5810 NW 12 CT SUNRISE, FL 33313		
2. Principal Place of Business 1720 S.W. 9 ST Suite, Apt. #, etc.		3. Mailing Address 1720 S.W. 9 ST Suite, Apt. #, etc.			
City & State Boca Raton FL		City & State Boca Raton FL		4. FEI Number 65-0175773	
Zip 33486		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DE FRANCISCO, RONALD XAVIER JR. 5810 NW 12 CT SUNRISE, FL 33313			7. Name and Address of New Registered Agent Name: <u>Brian Wilson</u> Street Address (P.O. Box Number is Not Acceptable): <u>90 WILCO LAND DEVELOPMENT</u> <u>2200 N. FEDERAL HWY #201</u> City: <u>Boca Raton</u> <u>FL</u> <u>33431</u>		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>[Signature]</u> DATE: <u>6/14/06</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE D NAME DE FRANCISCO, RONALD X. STREET ADDRESS 5810 NW 12 CT CITY - ST - ZIP SUNRISE, FL	<input type="checkbox"/> Delete		TITLE Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/> NAME Ronald X. DeFrancisco STREET ADDRESS 4001 Randall Lane CITY - ST - ZIP Thompson Station TN 37179	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE V NAME DEFRANCISCO, RONALD X. SR. STREET ADDRESS 1291 NW 60 AVE CITY - ST - ZIP SUNRISE, FL	<input type="checkbox"/> Delete		TITLE Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/> NAME Brian Wilson STREET ADDRESS 1720 S.W. 9 ST CITY - ST - ZIP Boca Raton FL 33486	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE T NAME DEFRANCISCO, DANIEL STREET ADDRESS 7956 RIDGEWOOD DR CITY - ST - ZIP LAKE WORTH, FL	<input type="checkbox"/> Delete		TITLE Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/> NAME Janet Wilson STREET ADDRESS 1720 S.W. 9 ST CITY - ST - ZIP Boca Raton FL 33486	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Ronald X. DeFrancisco</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>5-31-06</u> Date		<u>615 771-1966</u> Daytime Phone #