

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M22603

FILED
Apr 24, 2005
Secretary of State

Entity Name: CONSTRUCTION SERVICES & SUPPLIES, INC.

Current Principal Place of Business:

C/O PEDRO LUIS LOPEZ
11249 S.W. 34TH LANE
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

C/O PEDRO LUIS LOPEZ
11249 S.W. 34TH LANE
MIAMI, FL 33165

New Mailing Address:

FEI Number: 59-2592794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, PEDRO LUIS
11249 S.W. 34TH LANE
MIAMI, FL 33165 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: LOPEZ, PEDRO LUIS,
Address: 11249 S.W. 34TH LANE
City-St-Zip: MIAMI, FL

Title: V () Delete
Name: PEREZ, MANUEL L
Address: 11030 SW 55 STREET
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PEDRO LUIS LOPEZ

DPST

04/24/2005

Electronic Signature of Signing Officer or Director

Date