## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000023496

Entity Name: C.F.G. CONSTRUCTION INC.

FILED Jul 28, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

7061 GRAND NATIONAL DR 5409 LOS PALMA VISTA DR STE 107J ORLANDO, FL 32837

ORLANDO, FL 32819

Current Mailing Address: New Mailing Address:

7061 GRAND NATIONAL DR 5409 LOS PALMA VISTA DR STE 107J ORLANDO, FL 32819

FEI Number: 59-3631084 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:

RIBEIRO, FABIANA
7061 GRAND NATIONAL DRIVE
STE 107J
ORLANDO, FL 32819 US
SILVA, CAIO
5409 LOS PALMA VISTA DR
ORLANDO, FL 32837 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: CAIO SILVA 07/28/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

 Name:
 SILVA, CAIO
 Name:
 SILVA, CAIO

 Address:
 12414 BALERIA COVE #105
 Address:
 5409 LOS PALMA VISTA DR

City-St-Zip: ORLANDO, FL 32837 City-St-Zip: ORLANDO, FL 32837

Title: SD (X) Delete Title: ( ) Change ( ) Addition
Name: RIBEIRO FABIANA Name:

 Name:
 RIBEIRO, FABIANA
 Name:

 Address:
 12414 BALERIA COVE #105
 Address:

 City-St-Zip:
 ORLANDO, FL 32837
 City-St-Zip:

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 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: CAIO SILVA PD 07/28/2008