2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 08, 2005
Secretary of State

DOCUMENT# P00000085385

Entity Name: A. VALDES CONSTRUCTION, INC.

Current Principal Place of Business:

5612 SOUTH DIXIE HIGHWAY
#104
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

5612 SOUTH DIXIE HIGHWAY
#104
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 65-1042108 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VALDES, ALFREDO
130 RUTLAND
WEST PALM BEACH, FL 33405 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

OFFICERS AND DIRECTORS:

Title: PVTD ( ) Delete
Name: VALDES, ALFREDO
Address: 5612 SOUTH DIXIE HIGHWAY #104
City-St-Zip: WEST PALM BEACH, FL 33405

Title: SD ( ) Delete
Name: VALDES, LORENZO E
Address: 5612 SOUTH DIXIE HIGHWAY #104
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D ( ) Delete
Name: VALDES, JOSE L
Address: 5612 SOUTH DIXIE HIGHWAY #104
City-St-Zip: WEST PALM BEACH, FL 33405

Title: VP ( ) Delete
Name: VALDES, BARBARA C
Address: 5612 SOUTH DIXIE HWY #104
City-St-Zip: WEST PALM BEACH, FL 33405

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D ( ) Change (X) Addition
Name: PITSCHMANN, PATRIK
Address: 5612 SOUTH DIXIE HWY #104
City-St-Zip: WEST PALM BEACH, FL 33405

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: ALFREDO VALDES PVTD 12/08/2005

Electronic Signature of Signing Officer or Director — Date