

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 24, 2005 8:00 am**  
**Secretary of State**

03-24-2005 90027 028 \*\*\*150.00

<b>DOCUMENT # P01000012015</b>					
<b>1. Entity Name</b> CORNERSTONE CUSTOM CONSTRUCTION INC.					
<b>Principal Place of Business</b> 947 PADDINGTON TERR HEATHROW, FL 32746			<b>Mailing Address</b> 947 PADDINGTON TERR HEATHROW, FL 32746		
<b>2. Principal Place of Business</b> 1182 CHANTRY PL Suite, Apt. #, etc. #		<b>3. Mailing Address</b> 1182 CHANTRY PL Suite, Apt. #, etc.			
<b>City &amp; State</b> HEATHROW FL		<b>City &amp; State</b> HEATHROW, FL		<b>4. FEI Number</b> 59-3699441	
<b>Zip</b> 32746		<b>Country</b> SEMINOLE		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> ULIBARRI, JORGE 947 PADDINGTON TERR HEATHROW, FL 32746			<b>7. Name and Address of New Registered Agent</b> Name: # Street Address (P.O. Box Number is Not Acceptable) 1182 CHANTRY PL City: HEATHROW FL Zip Code: 32746		
<b>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.</b>					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	D ULIBARRI, JORGE <input type="checkbox"/> Delete 947 PADDINGTON TERR HEATHROW, FL 32746		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	1182 CHANTRY PL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition HEATHROW FL 32746	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<b>12. I hereby certify that the information supplied with this filing does not qualify 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 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.</b>					
<b>SIGNATURE:</b> <u>Jorge Ulbarri</u> / <b>JORGE ULIBARRI</b> / <b>DIRECTOR</b> <u>03/21/05 (401) 733-5500</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					