2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 25, 2005 8:00 am Secretary of State

DOCUMENT # P01000018011 1. Entity Name DADE CONSTRUCTION REMODELING, CORP.						07-25	-2005 9	0107 03	1 ***150	0.00	
Principal Place of Business 3899 J.W. 7TH STREET SUITE 201 MIAMI, FL 33125		Mailing Address 3899 N.W. 7TH STREET SUITE/203 VIAM, FL 33125] 					:1 12 1 1 100	
	face of Business IE 123MD ST	3. Mailing Address 1549 NE 123ND ST									
Suite, Apt. #, etc.		Suite, Apt. #, etc.		C	6302005	Chg-	Р	CR2E03	4 (10/03)		
City & State	", FL	City & State N. MIA~ /	FL	4.	. FEI Number 65-1078				_ 	plied For t Applicable	
Zip 3 3161	Country USA 6. Name and Address of Current F	Zip 33161-6029	33161-6029 USA			5. Certificate of Status Desired \$8.75 Additional Fee Required					
	7.	7. Name and Address of New Registered Agent									
ARTEAGA 3899 N.W.	7TJH STRJEG/T	Street A	Street Address (P.O. Box Number is Not Acceptable)								
SUITE 203 MAMI, FL	33125	IS49 City N	1549 NE 123RD ST								
8. The above	named entity submits this statement for		FL agent, or both	, in the Si	ate of Flori	FL ida. I am fa	Zip Code 33/6 miliar with,	and accept			
the obligations of registered agent. SIGNATURE 1. SIGNATURE 2. SIGNAT											
· · · · · · · · · · · · · · · · · · ·	Signature typed or printed name of registered agent a	nd title if an Aicable. (NOTE	Registered Agent signati	are required wher	n reinstating)	·	-	DATE	•		
	LE NOW!!! FEE IS \$150.00 ue by September 7, 2005	gn Financing ibution.	\$5.00 Added to	May Be o Fees	In accor corpora	rdance wi tion did n	th s. 607.1 ot receive	193(2)(b), the prior r	F.S., the notice.		
10.	OFFICERS AND I		11.	· A	ADDITIONS/C	HANGES	TO OFFIC				
TITLE NAME STREET ADDRESS	PD ARTEAGA, IRMA 38/99/N/W/77/H SYTREET/#20/8	☐ Delete	TITLE NAME STREET ADDRESS	1549 A	UE 123 VA~;	RD	ST		Change	Addition [
CITY-ST-ZIP	MIAM/, PL 3/31/25 /		CITY-ST-ZIP	N.M	VAMI	FL	3316		□ Change	Addition	
TITLE NAME STREET ADDRESS City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP						C) Glange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					ı	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE TIAME STREET ADDRESS CITY-ST-ZIP					,	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-2IP						Change	Addition	
I indicated of the co.	L. certify that the information supplied with I on this report or supplemental report is rporation or the receiver or trustee empo , or on an attachment with an address, v	true and accurate and that no wered to execute this report	ny signature snaii r as required by Cha								

ATTACHMEN 20065-170

June 30, 2005

Uniform Business Report Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

NEW ADDRESS: 1549 NE 123RD STREET NORTH MIAMI FL 33161-6029

To Whom It May Concern:

This letter is in regards to the corporation annual report for the year 2005, according to ours records we never received an annual report for our corporation. We are filled out blank report to your department because we never received the original report. Please accept our apologies and accept this 150.00 filing fee. We never meant to send the report late, if we would have received the report, we would have sent it on time. We apologize any inconvenience this may have caused.

If you have any questions please feel free to contact me at (305) 541-3980.

Sincerely,

PRESIDENT