2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000023425

FILED Apr 30, 2003 Secretary of State

Entity Name: RUGGERI CONSTRUCTION HOME REPAIR & IMPROVEMENT INC.

Current Pri	incipal Place	of Business:	New Princ	ipal Place of Bu	ısiness:	
4413 EAGLE ELKTON, FI	E CREEK CT L 32033			R WAY #2 B STINE, FL 32086	6	
Current Ma	ailing Addres	s:	New Mailir	ng Address:		
4413 EAGLE ELKTON, FI	E CREEK CT L 32033			R WAY #2 B STINE, FL 32086	6	
FEI Number: 5	59-3702259	FEI Number Applied For()	FEI Number Not Appli	icable () C	ertificate of Status Des	ired()
Name and /	Address of C	urrent Registered Agent:	Name and	Address of Nev	v Registered Agent	t:
ELKTON, FI	E CREEK CT L 32033	submits this statement for the	purpose of changing it	s registered offic	e or registered ager	nt, or both,
in the State						
n the State	of Florida. E:					
n the State	of Florida. E:	ic Signature of Registered Ag	gent		Date	
n the State	of Florida. E: Electror	ic Signature of Registered Ag Trust Fund Contribution ().	gent		Date	
in the State of SIGNATUR!	of Florida. E: Electror	g Trust Fund Contribution().	•	S/CHANGES TO	Date Difficers AND I	DIRECTORS
n the State of SIGNATUR! Election Camp OFFICERS Fitle: Name: Address:	of Florida. E: Electror paign Financing AND DIREC	g Trust Fund Contribution (). TORS: Delete EPH J REEK CT.	•			DIRECTOR:
n the State of SIGNATURI S	of Florida. E: Electror paign Financing AND DIREC PD () RUGGERI, JOS 4413 EAGLE C ELKTON, FL 3	Trust Fund Contribution (). TORS: Delete EPH J REEK CT. 2033 Delete IN R REEK CT.	ADDITION Title: Name: Address:	() Ch	O OFFICERS AND I mange () Addition mange () Addition R ANE	DIRECTOR

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: JOSEPH J. RUGGERI PD 04/30/2003