

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000082010

Entity Name: BELLA VISTA BUILDERS, INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

1316 ISLE WORTH CT
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

1316 ISLEWORTH CT
ROYAL PALM BEACH, FL 33411

Current Mailing Address:

P.O. BOX 213398
ROYAL PALM BEACH, FL 33421

New Mailing Address:

FEI Number: 65-1135590 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PUENTE, NEPTALI A
1316 ISLE WORTH CT
ROYAL PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

PUENTE, NEPTALI A
1316 ISLEWORTH CT
ROYAL PALM BEACH, FL 33411 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: _____

Electronic Signature of Registered Agent

04/29/2008

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: PUENTE, NEPTALI A
Address: 1316 ISLE WORTH COURT
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: DVPS () Delete
Name: PUENTE, BEATRIZ
Address: 1316 ISLE WORTH COURT
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: PUENTE, NEPTALI A
Address: 1316 ISLEWORTH COURT
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: DVPS (X) Change () Addition
Name: PUENTE, BEATRIZ
Address: 1316 ISLEWORTH COURT
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: NEPTALI PUENTE

Electronic Signature of Signing Officer or Director

DPT

04/29/2008

Date