2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2008 8:00 am Secretary of State

AUTO AL ILLI GILI						Secretary or State				
DOCUMENT # P0200005744 1. Entity Name BALART CONSTRUCTION, INC.					TO THE STATE OF TH		08 90369 0			
Principal Place of Business Mailing Address				•	− 4]∪∪∪∨	• •				
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9730 SW 48TH ST		9730 SW 48TH ST								
MIAMI, FL 33165		MIAMI, FL 33165			_ `					
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Principal Place of Business - No P.O. Box # Mailing Address										
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Suite, Apt.	# etc	Suite, Apt. #, etc.			\dashv					
Solle, Apr. #, etc.		Salar party star		01112008	Chg-P	CR2E03	4 (12/06)			
City & State		City & State			4. FEI Numbe			I An	plied For	
Only di Oldio		Disy to Glass			04-358			<u> </u>	t Applicable	
Zip Country		Zip Cour		ntry			_ •	8.75 Add		
2.10	Country	2.10		,	5. Certificate	of Status Desired		ee Require		
	6. Name and Address of Current	t Rogistored Agent	<u> </u>		7 Name and	Address of Nev				
		t ttogistores rigorii		7. Name and Address of New Registered Agent Name						
SPIEGEL A	& UTRERA, P.A.									
1840 SW 22ND ST.				Street Address (P.O. Box Number is Not Acceptable)						
4TH FLOOR				·						
MIAMI, FL 33145										
				City				Zip Code	n	
				U.G			FL		_	
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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.					55.00 May Be added to Fees					
10.	OFFICERS AND DIRECTORS 1			-	ADDITIONS	CHANGES TO C	FFICERS AND	DIRECTORS	\$ IN 11	
TITLE	PSTD	☐ Delete	TITL	E				Change	☐ Addition	
NAME	BALART, ILDEFONSO		NAM	AE						
STREET ADDRESS	9730 SOUTHWEST 48TH STREET		STRI	EET ADDRESS						
CITY-SI-ZIP	MIAMI, FL 33165			r-ST-ZIP						
TITLE	s	☐ Delete	TITL	E		į.		☐ Change	☐ Addition	
NAME	BALANT, ROSA H	build	NAM							
STREET ADDRESS	9730 SW 48 ST		STRI	EET ADDRESS						
CITY-ST-ZIP	MIAMI, FL 33165			r-ST-ZIP						
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NAME STREET ADDRESS				FET ANDRESS						
CITY-ST-ZIP				r-ST-ZIP						
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TITLE		☐ Delete	TITL	I .				☐ Change	☐ Addition	
NAME			NAM	I .						
STREET ADDRESS				EET ADDRESS (-ST-ZIP						
CITY-ST-ZIP			GIT	1-51-ZIP						
TITLE		☐ Delete	TITL					☐ Change	■ Addition	
NAME			NAM							
STREET ADDRESS				EET ADORESS						
CITY-ST-ZIP			CITY	Y-ST-ZIP						
TITLE		☐ Delete	T†TL	.E				Change	☐ Addition	
NAME			NAN	ME						
STREET ADDRESS			STR	EET ADDRESS						
CITY-ST-ZIP			CITY	Y-ST-ZIP						
12. Thereby	certify that the information supplied wi	th this filing does not qualify f	or the ex	emptions contain	ned in Chapter 11	9. Florida Statute	s. I further certi	fy that the i	nformation	
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indicated on his 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 at other like empowered.

4-2308 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-08 3057960177

Daytime Phone #