2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000055792

1. Entity Name
MORENO RESIDENTIAL CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
1234 S.E. CORAL REEF STREET PORT ST. LUCIE, FL 34983	1234 S.E. CORAL REEF STREET PORT ST. LUCIE, FL 34983

DO NOT WRITE IN THIS SPACE

03232006 No Chg-P CR2E034 (11/05)

4. FEI Number
04-3674232

Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MORENO, TINA
1234 S.E. CORAL REEF STREET
PORT ST. LUCIE, FL 34983

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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.

SIGNATURE: Tina Moreno

Electronic signature of registered agent required for electronic filing. Date

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	EICHSTADT, WALTER
STREET ADDRESS	1234 S.E. CORAL REEF STREET
CITY ST ZIP	PORT ST. LUCIE, FL 34983
TITLE	D
NAME	MORENO, ANTHONY
STREET ADDRESS	1234 S.E. CORAL REEF STREET
CITY ST ZIP	PORT ST. LUCIE, FL 34983
TITLE	D
NAME	MORENO, TINA
STREET ADDRESS	1234 S.E. CORAL REEF STREET
CITY ST ZIP	PORT ST. LUCIE, FL 34983
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: Tina Moreno

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date