

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000064991

FILED
Mar 02, 2005
Secretary of State

Entity Name: BUILDING SERVICE DIVISION BSD, C.A., INC.

Current Principal Place of Business:

5460 N STATE RD. 7
SUITE 218
FORT LAUDERDALE, FL 33319 US

Current Mailing Address:

5460 N STATE RD. 7
SUITE 218
FORT LAUDERDALE, FL 33319 US

FEI Number: 02-0620642

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARMONA, RICARDO B
3400 CORAL WAY, SUITE 600
MIAMI, FL 331453053 US

New Principal Place of Business:

5460 N STATE RD. 7
SUITE 118
FORT LAUDERDALE, FL 33319 US

New Mailing Address:

5460 N STATE RD. 7
SUITE 118
FORT LAUDERDALE, FL 33319 US

Name and Address of New Registered Agent:

CARMONA, RICARDO B
8930 STATE RD 84 # 231
DAVIE, FL 33324 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: RICARDO BARON CARMONA

03/02/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: CARMONA, RICARDO B
Address: 8930 STATE RD 84
City-St-Zip: DAVIE, FL 33324

Title: D (X) Delete
Name: ANZELLINI, ALBERTO
Address: 8930 STATE RD 84
City-St-Zip: DAVIE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: ANZELLINI, ALBERTO
Address: 8930 STATE RD 84 # 231
City-St-Zip: DAVIE, FL 33324

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALBERTO ANZELLINI

PSD

03/02/2005

Electronic Signature of Signing Officer or Director

Date