

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 22, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000070348**

1. Entity Name  
CUSTOM CONTRACTING OF TAMPA, INC.



Principal Place of Business  
2928 MINUTEMAN LANE  
BRANDON, FL 33511

Mailing Address  
2928 MINUTEMAN LANE  
BRANDON, FL 33511



03202006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 03-0463668	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

TIEMANN, WILLIAM A JR.  
2928 MINUTEMAN LANE  
BRANDON, FL 33511

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

UN00000476825  
04/06/06-80026-014 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	TIEMANN, WILLIAM A
STREET ADDRESS	2928 MINUTEMAN LANE
CITY - ST - ZIP	BRANDON, FL 33511

TITLE	V
NAME	TIEMANN, REBECCA P
STREET ADDRESS	2928 MINUTEMAN LANE
CITY - ST - ZIP	BRANDON, FL 33511

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 it 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:**

WILLIAM A TIEMANN JR *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/06  
Date

813-748-0777  
Daytime Phone #