

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000103059

FILED  
Mar 13, 2007  
Secretary of State

Entity Name: ALFREDO'S CONSTRUCTION, INC.

**Current Principal Place of Business:**

957 SW JASLO AVE  
PORT ST. LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

957 SW JASLO AVE  
PORT ST. LUCIE, FL 34953

**New Mailing Address:**

FEI Number: 52-2385518

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GUZMAN, ALFREDO  
957 SW JASLO AVE  
PORT ST. LUCIE, FL 34953 US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GUZMAN, ALFREDO  
Address: 957 SW JASLO AVE  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: D ( ) Delete  
Name: SANCHEZ, PEDRO  
Address: 14328 79TH CT N  
City-St-Zip: LOXAHATCHEE, FL 33470

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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: ALFREDO GUZMAN

PD

03/13/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date