## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** May 06, 2005 8:00 am Secretary of State

1. Entity Name ACCU CONSTRUCTION SERVICES, INC.							05-06-2005 \$	90083 032	2 ***150	).00	
Principal Place 6151 MiRIMA 218 MIRAMAR, FL	IR PARKWAY	•	Mailing Address P.O. BOX 470085 MIAMI, FL 33247-0085 US								
<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>										
2. Principal Place of Business			3. Mailing Address				I BAKSA KKU BAKU BYTIK ABUTI	96(I)	<b>                                   </b>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			05032005	Chg-P	CR2E034	(10/03)		
City & State			City & State			4. FEI Number Applied Fc 90-0060621 Not Applie				plied For t Applicable	
Zip	Country		Zip Coun		itry				8.75 Additional e Required		
	6. Name	and Address of Curren	t Registered Agent		7. Name and Address of New Registered Agent						
JUAN, AMENEIRO					ORLANDO MARTINEZ						
6151 MIRA 218	MAR PAF	RKWAY			Street Address (P.O. Box Number is Not Acceptable) 0151 Miramar Parkway # 303						
MIRAMAR	, FLORID/	FL 33023	•						·		
A Az					City Miramar FL Zip Code 33023						
8. The above named entity sybmits 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 obligation of registered agent.											
SIGNATURE Substant hyped or printed name of experimental agent and title if applicable. (NOTE: Registered A							×				
	Signature hyped	or printed name of segretared agen	it and title it applicable. (	NOTE: Registere	id Agent signature required	d when reinstating)		DATE	<del></del>		
							.00 May Be ded to Fees In accordance with s. 607.193(2)(b), F:S., the corporation did not receive the prior notice.				
10. TITLE	PST	OFFICERS AND		11.		ADDITIONS	/CHANGES TO OFFI		IRECTORS Change		
name Street address	MARTINE 774 NW 1	Z, ORLANDO 12TH STREET	☐ Delete	TITE NAM STRI	i			·	_1 Cutalitie	☐ Addition	
CITY-ST-ZIP	MIAMI, FL	. 33168	Delete	CITY	'-ST-ZIP				☐ Change	☐ Addition	
NAME			L. Delete	NAM	l l			L	change		
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS '-ST-ZIP						
TITLE			Delete	TITL	1				Change	Addition	
name Street address				naiv Stri	EET ADDRESS						
CITY-ST-ZIP	  -				'-ST-ZIP						
TITLE NAME			☐ Delete	TITL NAM				Į.	Change	Addition	
STREET ADDRESS CITY-ST-ZIP					EET ADORESS (-ST-ZIP						
TITLE			☐ Delete	TITL					Change	☐ Addition	
Hame Street adoress				NAA/ STRI	LE EET ADDRESS					:	
CJTY-ST-ZIP					-ST-ZIP						
TITLE NAME			☐ Delete	TITE Nam	1			(	Change	☐ Addition	
STREET ADDRESS				STR	EET AOORESS						
CITY-ST-ZIP	ertify that the	a information of infilled wi	th this filing does not qualif		rest-zip	ection 119 07/31	(i) Fiorida Statutos I	further certifi	v that the in	formation	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 of trugbee emplowered 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 any address, with all other like empowered.											