## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P03000023620

1. Entity Name

THOMAS CONSTRUCTION & DEVELOPMENT, INC.



FILED
May 04, 2007 08:00 A
Secretary of State

Principal Place of Business

3661 PERCIVAL AVENUE MIAMI, FL 33133

Mailing Address

3661 PERCIVAL AVENUE MIAMI, FL 33133



05012007

No Chg-P

CR2E034 (11/05)

4. FEI Number 11-3679039 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

THOMAS, STEPHEN A 3661 PERCIVAL AVENUE MIAMI, FL 33133 DO NOT WRITE IN THIS SPACE

|  | named entity submits this statement for the pions of registered agent. | urpose of changing its register | ed office or registered agent, or both   | h, in the State of Florida. I am familiar with, and accept   |
|--|--|---------------------------------|--|--|
| SIGNATURE_   | Signature, typed or printed name of registered agent and title i       | applicable (NOTE: Registers     | ed Agent signature required when reinstaling)  | DATE   |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Fir Trust Fund Contribution |  |                                 |  |  |
| 10.  | OFFICERS AND DIRECTORS   |                                 | and the second s |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | PRES THOMAS, STEPHEN A 3661 PERCIVAL AVENUE MIAMI, FL 33133            |                                 | and the second s | A STATE OF THE STA |
| TITLE NAME STREET ADDRESS CITY-ST-7IP  | TRES BELLINGER. PHYLLIS T MRS. 3661 PERCIVAL AVE. MIAMI, FL 33133      |                                 |  | 000000761307<br>05/25/07-80048-019 150.00  |

DO NOT WRITE
IN THIS SPACE

12. Thereby certify that the information supplied with this filling 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:

TITLE NAME STREET ADDRESS

CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/07 (305)481-053