2006 FOR PROFIT CORPORATION ANNUAL REPORT

TITLE
NAME
STREET ADDRESS
CHY-SI-77P

Secretary of State DOCUMENT # P03000083579 1. Entity Name J C V CONSTRUCTION, INC Mailing Address Principal Place of Business 657 NW 13TH ST 657 NW 13TH ST HOMESTEAD, FL 33030 HOMESTEAD, FL 33030 No Cha-P CR2E034 (11/05) 04072006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 20-0121311 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE VELAZQUEZ, JUAN C 657 NW 13TH ST HOMESTEAD, FL 33030 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, typed or printed name of registered agent and title if appricable (NOTE: Registered Agent signature required when reinstating) DATE 04/25/06-80067-802 158,75 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS me VELAZQUEZ, JUAN C NAME 657 NW 13TH ST STREET ADDRESS HOMESTEAD, FL 33030 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZEP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP

FILED Apr 10, 2006 08:00 AM

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 118, 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:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Descriptions

Descriptions