2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Feb 11, 2008 08:00 AN Secretary of State DOCUMENT # P03000083851 1. Entity Name S.F. SPEEDY CONSTRUCTION, INC. Principal Place of Business Mailing Arldress 7620 SW 133 COURT 6317 SW 11 STREET MIAMI FL 33144 **MIAMI FL 33183** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 55-0843429 Not Applicable Ζıp Country Zιp Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PEREZ, JOSE A 6317 S.W. 11 STREET Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33144** City Zip Code 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 Sign store, typed or controd name of registered agent and the Tappi cacio. (NOTE: Registried Agent aignature required when reinstituting) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Centribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Delete ☐ Channe Addition NAME DOMINGUEZ, ROLANDO NAME STREET ADDRESS 7620 SW 133 COURT STREET ADDRESS CITY-ST-ZIP MIAMI FL 33183 CITY-ST-ZIP TITLE ۷D ☐ Delete TITLE Change Addition NAME GOMEZ, ROSARIO NAME STREET ADDRESS 245 SW 183 COURT STREET ADDRESS U00000823467 /20/08-800<u>41-002_150.00</u> CITY-31-7I2 **MIAMI FL 33184** CITY-ST-ZIP TITLE TD ☐ Derete TITLE ☐ Change Addition NAME FONTICIELLA, SONIA NAME STREET ADDRESS 7620 SW 133 COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33183 TITLE Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP De ete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 efficier 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 attached with an address, with all other like empowered.

ROLANDO DOMINGUEZ

Day: no Phone #

SIGNATURE: