## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURES

## Mar 21, 2005 08:00 AM **Secretary of State** DOCUMENT # P03000095754 1. Entity Name CORREA'S CONSTRUCTION SERVICES, INC. Principal Place of Business 🚊 Mailing Address 5523 22ND PL. SW 5523 22ND PL. SW NAPLES, FL 34116 NAPLES, FL 34116 03112005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 58-9827345 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORREA, ENRIQUE SR DO NOT WRITE 5523 22ND PL. SW NAPLES, FL 34116 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 hted name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE CORREA, ENRIQUE SR 5523 22ND PL. SW STREET ADDRESS NAPLES, FL 34116 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TOTLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 eath, 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 attaging twith an address, with 30 other like empowered.

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**