

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000103210

FILED  
Jan 10, 2011  
Secretary of State

**Entity Name:** BUILDERS CORPORATION

**Current Principal Place of Business:**

366 W 12TH STREET  
HIALEAH, FL 33010 US

**New Principal Place of Business:**

**Current Mailing Address:**

366 W 12TH STREET  
HIALEAH, FL 33010 US

**New Mailing Address:**

**FEI Number:** 88-0519573

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAN PEDRO, ALBERT P  
366 W 12TH ST  
HIALEAH, FL 33010 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SAN PEDRO, ALBERT  
Address: 366 W 12TH STREET  
City-St-Zip: HIALEAH, FL 33010 US

Title: V  
Name: LEBOWITZ, WALTER  
Address: 366 W 12TH STREET  
City-St-Zip: HIALEAH, FL 33010 US

Title: T  
Name: SAN PEDRO, JOHN  
Address: 366 W 12TH STREET  
City-St-Zip: HIALEAH, FL 33010 US

Title: C  
Name: SAN PEDRO, ALBERT  
Address: 366 W 12TH STREET  
City-St-Zip: HIALEAH, FL 33010 US

Title: CEO  
Name: SAN PEDRO, ALBERT  
Address: 366 W 12TH STREET  
City-St-Zip: HIALEAH, FL 33010 FL

Title: S  
Name: SAN PEDRO, JOHN  
Address: 366 W 12TH STREET  
City-St-Zip: HIALEAH, FL 33010 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** JOHN SAN PEDRO

S

01/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date