

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000131431

FILED  
Apr 14, 2005  
Secretary of State

Entity Name: USA PLASTERING OF BROWARD COUNTY INC

**Current Principal Place of Business:**

22 NW 25 TERRACE  
FORT LAUDERDALE, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

22 NW 25 TERRACE  
FORT LAUDERDALE, FL 33311

**New Mailing Address:**

FEI Number: 20-0392149

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAGO, ORLANDO  
22 NW 25 TERRACE  
FORT LAUDERDALE, FL 33311 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LAGO, ORLANDO  
Address: 810 NW 115 AVENUE  
City-St-Zip: PLANTATION, FL 33325

Title: VP ( ) Delete  
Name: GONZALEZ, EVELIO  
Address: 800 NW 115 AVENUE  
City-St-Zip: PLANTATION, FL 33325

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ORLANDO LAGO

P

04/14/2005

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

\_\_\_\_\_  
Date