2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P03000153113

Entity Name: MARCELO CONSELHO CONSTRUCTION INC

Current Principal Place of Business:

8147 WELLSMERE CIR
ORLANDO, FL 32835 US

New Principal Place of Business:

Current Mailing Address:

8147 WELLSMERE CIR
ORLANDO, FL 32835 US

New Mailing Address:

FEI Number: 16-1669930 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALL FLORIDA FIRM, INC.
465 S VOLUSIA AV, SUITE C
ORANGE CITY, FL 32763 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: BOM CONSELHO, MARCELO
Address: 8147 WELLSMERE CIR
City-St-Zip: ORLANDO, FL 32835 US

Title: VP ( ) Delete
Name: BOM CONSELHO, MARIA A
Address: 8147 WELLSMERE CIR
City-St-Zip: ORLANDO, FL 32835 US

Title: T ( ) Delete
Name: BOM CONSELHO, MARCELA
Address: 8147 WELLSMERE CIR
City-St-Zip: ORLANDO, FL 32835

Title: S ( ) Delete
Name: BOM CONSELHO, MARCUS
Address: 8147 WELLSMERE CIR
City-St-Zip: ORLANDO, FL 32835

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: S ( ) Change (X) Addition
Name: BOM CONSELHO, MARIANNE
Address: 8147 WELLSMERE CIR
City-St-Zip: ORLANDO, FL 32835

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARCELO BOM CONSELHO P 04/29/2009

Electronic Signature of Signing Officer or Director — Date