


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90149 028 ***150.00

DOCUMENT # P04000008886 1. Entity Name CONSTRUCTION FRAMING ASSOCIATES INC	
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Principal Place of Business 2507 NEWBERRY ST ORLANDO, FL 32806	Mailing Address 2507 NEWBERRY ST ORLANDO, FL 32806
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DO NOT WRITE IN THIS SPACE



01042006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0590039	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CUSTODIO, ROBERT J
2507 NEWBERRY ST
ORLANDO, FL 32806

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ESPINALES, ALEJANDRO 2507 NEWBERRY STREET ORLANDO, FL 32806
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CUSTODIO, ROBERT J 2507 NEWBERRY STREET ORLANDO, FL 32806
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <i>William Ortiz</i> 2507 NEWBERRY STREET ORLANDO, FL 32806
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Robert J. Custodio* 4/16/06 407-383-4235

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #