# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000015241

Entity Name: MEKO CONSTRUCTION, INC.

## FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
CHITTANT Principal Place of Blicipace	New Principal Place of Kilsiness:

797 GEORGIA STREET 284 SEMINOLE TRAIL CRESTVIEW, FL 32536 CRESTVIEW, FL 32536

Current Mailing Address: New Mailing Address:

P O BOX 1804 284 SEMINOLE TRAIL CRESTVIEW, FL 32536 CRESTVIEW, FL 32536

FEI Number: 20-0687905 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LINARES, ANGEL
797 GEORGIA STREET
CRESTVIEW, FL 32536 US
LINARES, ANGEL
284 SEMINOLE TRAIL
CRESTVIEW, FL 32536 US
CRESTVIEW, FL 32536 US

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: ANGEL LINARES 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

### **OFFICERS AND DIRECTORS:**

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 LINARES, ANGEL
 Name:
 LINARES, ANGEL

 Address:
 797 GEORGIA STREET
 Address:
 284 SEMINOLE TRAIL

 City-St-Zip:
 CRESTVIEW, FL 32536
 City-St-Zip:
 CRESTVIEW, FL 32536

Title: VD () Delete Title: () Change () Addition

 Name:
 DEL CASTILLO, MAURICIO F
 Name:

 Address:
 129 TWIN TREES DR.
 Address:

 City-St-Zip:
 DEFUNIAK SPRINGS, FL 32433
 City-St-Zip:

Title: VD (X) Delete Title: ( ) Change ( ) Addition

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: ANGEL LINARES PD 04/30/2009