

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000026041

FILED  
Jun 04, 2008  
Secretary of State

**Entity Name:** DEMOLITION & ASBESTOS REMOVAL, INC.

**Current Principal Place of Business:**

309 MYRTLE DRIVE  
NOKOMIS, FL 34274 US

**New Principal Place of Business:**

1399 S. BELCHER RD, LOT 172  
LARGO, FL 33771 US

**Current Mailing Address:**

C/O MARIA E. B. EKHOLM  
159 SCHOONER COURT  
RICHMOND, CA 94804 US

**New Mailing Address:**

C/O MARIA E. B. EKHOLM  
1023 SUNHILL CIRCLE  
EL SOBRANTE, CA 94803 US

**FEI Number:** 47-0943861

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SILBERSTEIN, DAVID M  
50 CENTRAL AVENUE, SUITE 700  
SARASOTA, FL 34236 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: LINDAL, ADAM  
Address: 309 MYRTLE DRIVE  
City-St-Zip: NOKOMIS, FL 34274 US

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

Title: DPST (X) Change ( ) Addition  
Name: LINDAL, ADAM  
Address: 1023 SUNHILL CIRCLE  
City-St-Zip: EL SOBRANTE, CA 94803 US

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: ADAM LINDAL

DPST

06/04/2008

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

\_\_\_\_\_  
Date