



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2008 08:00 A
Secretary of State

DOCUMENT # P04000027785	
1. Entity Name SOUTH FLORIDA INVESTMENT BUILDERS, INC	

Principal Place of Business 944 COUNTRY CLUB BLVD SUITE 107 CAPE CORAL, FL 33990 US	Mailing Address 229 NW 39TH AVE CAPE CORAL, FL 33993 US
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DO NOT WRITE IN THIS SPACE

	
03152008	No Chg-P CR2E034 (11/05)
4. FEI Number 20-0731898	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**THOMAS, CHAD A
229 NW 39TH AVE
CAPE CORAL, FL 33993**

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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, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/S THOMAS, CHAD A 229 NW 39TH AVE CAPE CORAL, FL 33993
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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: Chad Thomas 3-18-08 239-699-3553

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