FILED
May 16, 2006 8:00 am
Secretary of State

05-16-2006 90018 046 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000032267

1. Entity Name
POLY'S FRAMING & CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
4922 S.W. 25TH PLACE CAPE CORAL, FL 33914	4922 S.W. 25TH PLACE CAPE CORAL, FL 33914

40092355

05082006 Chg-P CR2E034 (11/05)

2. Principal Place of Business		3. Mailing Address	
9661 SW 162 Court Suite, Apt. #, etc.		9661 SW 162 Court Suite, Apt. #, etc.	
City & State: MIAMI, FL. 33196		City & State: MIAMI, FL.	
Zip: 33196	Country: USA	Zip: 33196	Country: USA

4. FEI Number: 05-0597151 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TREJO, ALFREDO
4922 S.W. 25TH PLACE
CAPE CORAL, FL 33914

7. Name and Address of New Registered Agent

Name: BIANCA Ponce
Street Address (P.O. Box Number is Not Acceptable): 9661 SW 162 Court
City: MIAMI FL Zip Code: 33196

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: X [signature] DATE: 5/8/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ — $5.00 May Be Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE	PVS	☐ Delete
NAME	PONCE, BIANCA	
STREET ADDRESS	4922 S.W. 25TH PLACE	
CITY-ST-ZIP	CAPE CORAL, FL 33914	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
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TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	9661 SW 162 Court	
CITY-ST-ZIP	MIAMI, FL. 33196	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: X [signature] BIANCA Ponce 5/8/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #