

## ANNUAL REPORT

DOCUMENT # P04000034277

1. Entity Name

PERFECTO RODRIGUEZ CONSTRUCTION, INC.



Principal Place of Business

9114 SW 162 PL  
MIAMI, FL 33196 US

Mailing Address

9114 SW 162 PL  
MIAMI, FL 33196 USMay  
Se

05092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FE# Number

20-0906041

Applied For

Not Applicable

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

## 6. Name and Address of Current Registered Agent

CESAR, DANNY  
9114 SW 162 PL  
MIAMI, FL 33196DO NOT WRITE  
IN THIS SPACE

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

Signature, last and first name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

5/9/06

FILE NOW!!! FEE IS \$150.00  
Due by September 6, 20069. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to FeesIn accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

## 10. OFFICERS AND DIRECTORS

TITLE P  
NAME RODRIGUEZ, PERFECTO  
STREET ADDRESS 9114 SW 162 PL  
CITY-ST-ZIP MIAMI, FL 33196TITLE VP  
NAME CESAR, DANNY  
STREET ADDRESS 9114 SW 162 PL  
CITY-ST-ZIP MIAMI, FL 33196TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
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CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPU00000564779  
05/20/06-80088-018 150.00DO NOT WRITE  
IN THIS SPACE

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 persons empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/9/06