


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
05 FEB 28 PM 12:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000037580					
1. Entity Name CAEL CONTRACTOR, INC.					
Principal Place of Business 7765 W 29 WAT #101 HIALEAH, FL 33018			Mailing Address 7765 W 29 WAT #101 HIALEAH, FL 33018		
2. Principal Place of Business <i>7765 W. 29 Way</i>		3. Mailing Address <i>7765 W. 29 Way</i>			
Suite, Apt. #, etc. <i># 101</i>		Suite, Apt. #, etc. <i># 101</i>			
City & State <i>Hialeah, FL</i>		City & State <i>Hialeah, FL</i>		4. FEI Number <i>13-4274650</i>	
Zip <i>33018</i>		Country <i>US</i>		Applied For Not Applicable	
Zip <i>33018</i>		Country <i>US</i>		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GIRALDO, CAMPO ELIAS 7765 W 29 WAT #101 HIALEAH, FL 33018			7. Name and Address of New Registered Agent Name <i>ERIKIN DARIO GIRALDO</i> Street Address (P.O. Box Number is Not Acceptable) <i>7765 W. 29 Way #101</i> City <i>Hialeah</i> FL Zip Code <i>33018</i>		
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 <i>[Signature]</i> DATE <i>2/23/05</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT GIRALDO, CAMPO ELIAS 7765 W 29 WAT #101 HIALEAH, FL 33018	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>PRESIDENT/SECRETARY/DIR</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>ERIKIN DARIO GIRALDO</i> <i>17023 N.W. 11 ST.</i> <i>DEMBROKE PINES, FL 33028</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS GIRALDO, LISSETTE 17360 SW 142 CT MIAMI, FL 33076	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>VICE PRESIDENT/TREA. DIR</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>ERIKIN DARIO GIRALDO, JR</i> <i>17023 NW 11 ST</i> <i>DEMBROKE PINES, FL 33028</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000047869920 03/08/05--01008--009 **150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>[Signature]</i>		<i>ERIKIN DARIO GIRALDO</i>		<i>2/23/05</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>PRESIDENTS</small>		<small>Date Daytime Phone #</small> <i>786-546-3446</i>	