

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000054517

FILED  
Mar 12, 2006  
Secretary of State

Entity Name: CONSTRUCTION DYNAMICS & CONSULTING, INC.

**Current Principal Place of Business:**

204 S WARD ST  
TAMPA, FL 33609

**New Principal Place of Business:**

5745 PARK BLVD. N.  
PINELLAS PARK, FL 33781

**Current Mailing Address:**

204 S WARD ST  
TAMPA, FL 33609

**New Mailing Address:**

FEI Number: 51-0504261      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GALVEZ, ANTHONY ANDREW  
204 S WARD ST  
TAMPA, FL 33609      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PVP ( ) Delete  
Name: GALVEZ, ANTHONY A  
Address: 204 S. WARD STREET  
City-St-Zip: TAMPA, FL 33609

Title: ST ( ) Delete  
Name: BREWER, TONI P  
Address: 204 S. WARD STREET  
City-St-Zip: TAMPA, FL 33609

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: P (X) Change ( ) Addition  
Name: GALVEZ, ANTHONY A  
Address: 204 S. WARD STREET  
City-St-Zip: TAMPA, FL 33609

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: GOEL, RAM DR.  
Address: 16306 DOUNE CT  
City-St-Zip: TAMPA, FL 33647

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTHONY GALVEZ

MR.

03/12/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date