


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 06, 2006 08:00 AM**  
**Secretary of State**

|   |                                   |                |  |   |  |
|---|-----------------------------------|----------------|--|---|--|
| <b>DOCUMENT # P04000056790</b>  |                                   |                |  |                                    |  |
| 1. Entity Name<br><b>AMEK HOMES BUILDING CORPORATION</b>  |                                   |                |  |   |  |
| Principal Place of Business<br><b>9021 SW 112 COURT<br/>MIAMI FL 33176</b>  |                                   |                | Mailing Address<br><b>9021 SW 112 COURT<br/>MIAMI FL 33176</b> |   |  |
| 2. Principal Place of Business  |                                   |                | 3. Mailing Address   |   |  |
| Suite, Apt. #, etc.   |                                   |                | Suite, Apt. #, etc.  |   |  |
| City & State  |                                   |                | City & State   |   |  |
| Zip   | Country                           | Zip            | Country  | 4. FEI Number<br><b>02-0719501</b>  |  |
| 5. Certificate of Status Desired <input type="checkbox"/>   |                                   |                |  | <b>\$8.75</b> Additional Fee Required   |  |
| 6. Name and Address of Current Registered Agent   |                                   |                |  | 7. Name and Address of New Registered Agent   |  |
| <b>HEALY, PATRICK F<br/>1800 WEST HIBISCUS BLVD.<br/>SUITE 138<br/>MELBOURNE FL</b>   |                                   |                |  | Name  |  |
|   |                                   |                |  | Street Address (P.O. Box Number is Not Acceptable)  |  |
|   |                                   |                |  | City  |  |
|   |                                   |                |  | <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>    |  |
| 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 replacing)<br><small>Signature typed or printed name of registered agent and title if applicable</small>  |                                   |                |  |   |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2006 Fee Will Be \$550.00</b><br><b>Make Check Payable to Florida Department of State</b>   |                                   |                |  | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees |  |
| 10. OFFICERS AND DIRECTORS  |                                   |                | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11          |   |  |
| TITLE   | D <input type="checkbox"/> Delete | TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Add   |   |  |
| NAME  | <b>MEKDECI, ANDREW</b>            | NAME           | <b>U000000421506</b>   |   |  |
| STREET ADDRESS  | <b>9021 SW 112TH COURT</b>        | STREET ADDRESS | <b>02/16/06-80039-012 150.00</b>                               |   |  |
| CITY-ST-ZIP   | <b>MIAMI FL 33176</b>             | CITY-ST-ZIP    |  |   |  |
| TITLE   | D <input type="checkbox"/> Delete | TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Add   |   |  |
| NAME  | <b>MEKDECI, MARISE</b>            | NAME           |  |   |  |
| STREET ADDRESS  | <b>9021 SW 112TH COURT</b>        | STREET ADDRESS |  |   |  |
| CITY-ST-ZIP   | <b>MIAMI FL 33176</b>             | CITY-ST-ZIP    |  |   |  |
| TITLE   | D <input type="checkbox"/> Delete | TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Add   |   |  |
| NAME  | <b>BEOLET, RONALD</b>             | NAME           |  |   |  |
| STREET ADDRESS  | <b>2610 RANCH ROAD</b>            | STREET ADDRESS |  |   |  |
| CITY-ST-ZIP   | <b>MELBOURNE FL 32904</b>         | CITY-ST-ZIP    |  |   |  |
| TITLE   | <input type="checkbox"/> Delete   | TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Add   |   |  |
| NAME  |                                   | NAME           |  |   |  |
| STREET ADDRESS  |                                   | STREET ADDRESS |  |   |  |
| CITY-ST-ZIP   |                                   | CITY-ST-ZIP    |  |   |  |
| TITLE   | <input type="checkbox"/> Delete   | TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Add   |   |  |
| NAME  |                                   | NAME           |  |   |  |
| STREET ADDRESS  |                                   | STREET ADDRESS |  |   |  |
| CITY-ST-ZIP   |                                   | CITY-ST-ZIP    |  |   |  |
| TITLE   | <input type="checkbox"/> Delete   | TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Add   |   |  |
| NAME  |                                   | NAME           |  |   |  |
| STREET ADDRESS  |                                   | STREET ADDRESS |  |   |  |
| CITY-ST-ZIP   |                                   | CITY-ST-ZIP    |  |   |  |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:** Andrew Mekdeci **ANDREW MEKDECI** **1-25-06 321-298-8195**