## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Feb 27, 2006 8:00 am **Secretary of State** DOCUMENT # P04000072982 02-27-2006 90074 040 \*\*\*150.00 **DEFÁZIO CONSTRUCTION INC** Principal Place of Business Mailing Address 1315 63RD STREET NW 5227 14TH STREET WEST BRADENTON, FL 34209 BRADENTON, FL 34207 3. Mailing Address 2. Principal Place of Business 63 RD Ave EAST 2335 T Suite, Apt. #, etc. Suite, Apt. #, etc. 02202006 CR2E034 (11/05) Applied For City & State City & State 4 FEI Number BRAD ENTO N $\mathcal{F}_{\mathcal{L}}$ 20-1088986 Not Applicable Country Zio Country \$8,75 Additional 5. Certificate of Status Desired 34203 П MANATOR Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HECKMAN, DONALD H Street Address (P.O. Box Number is Not Acceptable) 5227 14TH STREET WEST BRADENTON, FL 34207 63 PD Ave 2335 J EAST 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 reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Oelete TITLE ☐ Addition TITLE ☐ Change DEFAZIO: PAUL NAME 1315 63RD STREET NW STREET ADDRESS STREET ADDRESS BRADENTON, FL 34207 CITY-ST-ZIP CHTY-\$1-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IIILE ☐ Delete TITLE ☐ Change ☐ Addition HALLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME

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.

STREET ADDRESS

SIGNATURE: SIGNAPURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS

CITY-ST-ZIP

PRESIDENT OF

FILED