2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000092433

City-St-Zip:

Entity Name: DOS REIS ALL CONTRACTORS, CORP

FILED Jul 16, 2007 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
|--|-----------------------------------|--|----------------|--|--------------|---|
| 5525 CONROY RD #1 ORLANDO, FL 32811 US | | | 5 | 4413 S KIRKMAN RD STE 107 ORLANDO, FL 32811 US | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| | CONROY RD #1 ANDO, FL 32811 US | | | 4413 S KIRKMAN RD STE 107 ORLANDO, FL 32811 US | | |
| FEI Number | : 20-1250625 | FEI Number Applied For () | | er Not Appl | | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | |
| ACCOUNT BOOKKEEPING CORP 5950 LAKEHURST DR 246 ORLANDO, FL 32819 US | | | | CESASMAR, DOS SANTOS D 4413 S KIRKMAN RD STE 107 ORLANDO, FL 32811 US | | |
| | e named entity e of Florida. | submits this statement for the | purpose of o | changing it | s registered | office or registered agent, or both, |
| SIGNATURE: CESASMAR DIAS DOS SANTOS | | | | 07/16/2007 | | |
| Electronic Signature of Registered Agent | | | | Date | | |
| | | 3(2)(b), F.S., the corporation did n g Trust Fund Contribution (). | ot receive the | e prior notic | е. | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | |
| Title: Name: Address: City-St-Zip: | * | | ۸ <u>م</u> | Fitle: Name: Address: Dity-St-Zip: | DOS SANTOS | X) Change ()Addition 5, CESASMAR D MAN RD STE 107 L 32811 US |
| Title: Name: Address: City-St-Zip: | (|) Delete | ۸ م | Fitle: Name: Nddress: Dity-St-Zip: | CORSOETA, | MAN RD STE 107 |
| Title: Name: Address: City-St-Zip: | (|) Delete | ۸ <u>م</u> | Fitle: Name: Address: Dity-St-Zip: | SILVA, GELS | MAN RD STE 107 |
| Title: Name: Address: | (|) Delete | N | Fitle: Name: Nddress: | DE OLIVEIRA | () Change (X) Addition A, ADEILTON MAN RD STE 107 |

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip: ORLANDO, FL 32811 US

SIGNATURE: CESASMAR DIAS DOS SANTOS PD 07/16/2007