



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90028 040 ***150.00

DOCUMENT # P04000097877 1. Entity Name IDG CONSTRUCTION COMPANY, INC					
Principal Place of Business 8700 WEST FLAGLER ST MIAMI, FL 33174			Mailing Address 8700 WEST FLAGLER ST MIAMI, FL 33174		
2. Principal Place of Business - No P.O. Box # 8700 West Flagler Street		3. Mailing Address 8700 West Flagler Street			
Suite, Apt. #, etc. 355		Suite, Apt. #, etc. 355			
City & State Miami, Florida		City & State Miami, Florida			
Zip 33174		Country Miami-Dade		4. FEI Number 34-2002270	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent GUTIERREZ, ARIEL E 8700 W FLAGLER ST MIAMI, FL 33174			7. Name and Address of New Registered Agent Name Ariel E. Gutierrez Street Address (P.O. Box Number is Not Acceptable) 8700 West Flagler Street Suite 355 City Miami FL Zip Code 33174		
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. Ariel E. Gutierrez, President 01/07/2008 SIGNATURE _____ DATE _____ <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, 2008 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	P GUTIERREZ, ARIEL E 8700 W FLAGLER ST STE 355 MIAMI, FL 33174	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	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 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.					
SIGNATURE: ARIEL E. GUTIERREZ 01/07/2008 305 553-8911 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					