

FILED
Jan 31, 2007 8:00 am
Secretary of State

01-31-2007 90054 026 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000099977 1. Entity Name CONSTRUCCIONES BENDECIDAS, INC.	
--	---

Principal Place of Business 2 ALHAMBRA PLAZA SUITE 860 CORAL GABLES, FL 33134	Mailing Address 2 ALHAMBRA PLAZA SUITE 860 CORAL GABLES, FL 33134
---	---

40007907



01092007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2015480	Applied Fee Not Applicable
------------------------------------	-------------------------------

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
---	---

6. Name and Address of Current Registered Agent

**PADRON, CARLOS E
C/O VILLA, PADRON & DIAZ, P.A (VILA)
2 ALHAMBRA PLAZA, SUITE 860
CORAL GABLES, FL 33134**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature typed in printed name of registered agent and the filer, if applicable

NOTE: Registered Agent signature required when transferring

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD FARACH, FUAD A 2 ALHAMBRA PL STE 860 MIAMI, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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. I am an officer or director of the corporation or the receiver or trustee empowered to execute the 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 a former like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF TRUSTEE OR DIRECTOR

1/19/07

Signature Page 1