

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000114090

Entity Name: HORNOPE CONSTRUCTION INC.

FILED  
Apr 18, 2006  
Secretary of State

**Current Principal Place of Business:**

53 SOUTH OAK STREET  
FELLSMERE, FL 32948

**New Principal Place of Business:**

**Current Mailing Address:**

53 SOUTH OAK STREET  
FELLSMERE, FL 32948

**New Mailing Address:**

FEI Number: 20-1454453      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BEDOYA, DUBER  
2044 14TH AVE STE 21  
VERO BEACH, FL 32960 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ZAMARRIPA, PABLO SR.  
Address: 53 SOUHT OAK STREET  
City-St-Zip: FELLSMERE, FL 32948

Title: VP ( ) Delete  
Name: ZAMARRIPA, PABLO JR  
Address: 53 SOUTH OAK STREET  
City-St-Zip: FELLSMERE, FL 32948

Title: TR ( ) Delete  
Name: ZAMARRIPA, HORTENCIA  
Address: 53 SOUTH OAK STREET  
City-St-Zip: FELLSMERE, FL 32948

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TR (X) Change ( ) Addition  
Name: ZAMARRIPA, PEDRO  
Address: 53 SOUTH OAK STREET  
City-St-Zip: FELLSMERE, FL 32948

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

SIGNATURE: PABLO ZAMARRIPA SR.

P

04/18/2006

Electronic Signature of Signing Officer or Director

Date