2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000144057

City-St-Zip:

Entity Name: S & R ALL CONTRACTORS, CORP

FILED Feb 03, 2005 Secretary of State

Current P	rincipal Plac	e of Business:	New Prince	New Principal Place of Business:		
6420 METROWEST BLVD APT # 1003 ORLANDO, FL 32835 US				7514 PACIFIC HEIGHTS CIRCLE ORLANDO, FL 32835 US		
Current Mailing Address:			New Maili	New Mailing Address:		
6420 METROWEST BLVD APT # 1003 ORLANDO, FL 32835 US		7514 PACIFIC HEIGHTS CIRCLE ORLANDO, FL 32835 US				
	: 20-1767554	FEI Number Applied For()	FEI Number Not App	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
5950 LAKE SUITE 246 ORLANDO The above), FL, FL 328		purpose of changing i	ts registered	office or registered agent, or both,	
SIGNATU						
OIOIVATOI		nic Signature of Registered A	gent		Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	RODRIGUES,	WEST BLVD, APT# 1003	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DA SILVA, WE	WEST BLVD, APT#1003	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	S (DA SILVA, JO: RUA VASCO E IPATINGA, MG	DA GAMA 40	
Title: Name: Address:	() Delete	Title: Name: Address:	GONCALVES) Change (X) Addition RODRIGUES, SEBASTIAO LEIXO CAIXETA, 166	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE: GEOVANE RODRIGUES P 02/03/2005

PATOS DE MINAS, MG 38706 BR