

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90019 046 ***150.00

DOCUMENT # P04000161088 1. Entity Name VERACRUZ CONSTRUCTION INC.					
Principal Place of Business 433 N ORANGE AVE SARASOTA, FL 34236			Mailing Address 433 N ORANGE AVE SARASOTA, FL 34236		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address 1110 Manhattan Ave. #124			
City & State Sarasota, FL		City & State Sarasota, FL		4. FEI Number 51-0540182	
Zip 34237	Country	Zip 34237	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BELHOUCHE, MARY 3934 TROPICALE BLVD NORTH PORT, FL 34286-7118				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when translating) 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD GUZMAN, JAVIER H 433 N ORANGE AVE SARASOTA, FL 34236	☐ Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D SOTOS-FLORES, EFREN 433 N ORANGE AVE SARASOTA, FL 34236	☐ Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D CURIEL, ERNESTO 433 N. ORANGE AVE SARASOTA, FL 34236	☐ Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	[Empty]	☐ Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	[Empty]	☐ Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	[Empty]	☐ Delete			
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: _____ Javier H Guzman 04/11/2007 941-702-0354 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone					