~2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000162519

1. Entity Name

TUBAR CONSTRUCTION, INC.

FILED Jan 10, 2007 08:00 AM Secretary of State

Principal Place of Business

20701 QUINELLA ST. ORLANDO, FL 32833

Mailing Address

20701 QUINELLA ST. ORLANDO, FL 32833



DO NOT WRITE IN THIS SPACE

01072007 No Chg-P CR2

CR2E034 (11/05)

4. FEI Number 20-1950805

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAUDERBACK, LANE 20701 QUINELLA ST. ORLANDO, FL 32833

SIGNATURE

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 or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	ing 🖂	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
NAME STREET ADDRESS CITY-ST-ZIP	P LAUDERBACK, LANE 20701 QUINELLA ST. ORLANDO, FL 32833				000000581154 01/10/07-80077-001 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LAUDERBACK, HARRIET 20701 QUINELLA ST. ORLANDO, FL 32833				
NAME STREET ADDRESS CITY-ST-ZIP	S LAUDERBACK, HARRIET 20701 QUINELLA ST. ORLANDO, FL 32833			DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				in '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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.					