2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2007
Secretary of State

DOCUMENT# P04000169324

Entity Name: FRAGATA CONSTRUCTION COMPANY, INC.

Current Principal Place of Business:

432 FAIRPOINT DR
GULF BREEZE, FL 32561

New Principal Place of Business:

Current Mailing Address:

432 FAIRPOINT DR
GULF BREEZE, FL 32561

New Mailing Address:

FEI Number: 20-2038637 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRAGATA, OCTAVIO
432 FAIRPOINT DR
GULF BREEZE, FL 32561 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FRAGATA, OCTAVIO
Address: 17353 72ND RD N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: P ( ) Delete
Name: FRAGATA, OCTAVIO
Address: 17353 72ND RD N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: T ( ) Delete
Name: FRAGATA, OCTAVIO
Address: 17353 72ND RD N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: S ( ) Delete
Name: TAVARES, SONYA L
Address: 17353 72ND RD N
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FRAGATA, OCTAVIO
Address: 432 FAIRPOINT DR
City-St-Zip: GULF BREEZE, FL 32561

Title: P (X) Change ( ) Addition
Name: FRAGATA, OCTAVIO
Address: 432 FAIRPOINT DR
City-St-Zip: GULF BREEZE, FL 32561

Title: T (X) Change ( ) Addition
Name: FRAGATA, OCTAVIO
Address: 432 FAIRPOINT DR
City-St-Zip: GULF BREEZE, FL 32561

Title: S (X) Change ( ) Addition
Name: FRAGATA, SONYA L
Address: 432 FAIRPOINT DR
City-St-Zip: GULF BREEZE, FL 32561

I hereby certify that the information supplied with this filing does not qualify 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: OCTAVIO FRAGATA P 07/09/2007

Electronic Signature of Signing Officer or Director Date