2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000031221

Entity Name: YAKO'S CONSTRUCTION,INC

Current Principal Place of Business:	**New Principal Place of Business:**
1580 NW 128 DR APT 111 SUNRISE, FL 33323	11368 NW 34 PLACE SUNRISE, FL 33323
Current Mailing Address:	**New Mailing Address:**
1580 NW 128 DR APT 111 SUNRISE, FL 33323	11368 NW 34 PLACE SUNRISE, FL 33323

FEI Number: FEI Number Applied For (X)   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
MULLER, GINO 1580 NW 128 DR APT 111 SUNRISE, FL 33323 US	MULLER, GINO 11368 NW 34 PLACE SUNRISE, FL 33323 US

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: GINO MULLER   05/10/2006

_____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: ## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PVP ( ) Delete		Title:	PVP (X) Change ( ) Addition
Name:	MULLER, GINO		Name:	MULLER, GINO
Address:	1580 NW 128 DR #111		Address:	11368 NW 34 PLACE
City-St-Zip:	SUNRISE, FL 33023		City-St-Zip:	SUNRISE, FL 33023

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: GINO MULLER   PVP   05/10/2006

_____Electronic Signature of Signing Officer or Director_____   _____Date_____