

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000054773

FILED
Jul 05, 2006
Secretary of State

Entity Name: WORLD CLASS CUSTOM BUILDERS INC.

Current Principal Place of Business:

4307 OAK BLUFF AVE
HOLIDAY, FL 34691

New Principal Place of Business:

4301 OAK BLUFF AVE
HOLIDAY, FL 34691

Current Mailing Address:

4307 OAK BLUFF AVE
HOLIDAY, FL 34691

New Mailing Address:

4301 OAK BLUFF AVE
HOLIDAY, FL 34691

FEI Number: 84-1676353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TERMINI, JOSEPH
4307 OAK BLUFF AVE
HOLIDAY, FL 34691 US

Name and Address of New Registered Agent:

TERMINI, JOSEPH
4301 OAK BLUFF AVE
HOLIDAY, FL 34691 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: JOSEPH A TERMINI

07/05/2006

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:

Title: PSD () Delete
Name: TERMINI, JOSEPH A
Address: 4307 OAK BLUFF AVE
City-St-Zip: HOLIDAY, FL 34691

Title: VTD () Delete
Name: TERMINI, JOSEPH A
Address: 4307 OAK BLUFF AVE
City-St-Zip: HOLIDAY, FL 34691

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: TERMINI, JOSEPH A
Address: 4301 OAK BLUFF AVE
City-St-Zip: HOLIDAY, FL 34691

Title: VTD (X) Change () Addition
Name: TERMINI, JOSEPH A
Address: 4301 OAK BLUFF AVE
City-St-Zip: HOLIDAY, FL 34691

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: JOSEPH A TERMINI

PSD

07/05/2006

Electronic Signature of Signing Officer or Director

Date