

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000065243

FILED  
Aug 30, 2007  
Secretary of State

Entity Name: MASTERZONE DISASTER RESTORATION, INC.

## Current Principal Place of Business:

16605 SOUTHWEST 51ST TERRACE  
MIAMI, FL 33185

## New Principal Place of Business:

13395 SW 131 ST  
SUITE B  
MIAMI, FL 33186

## Current Mailing Address:

16605 SOUTHWEST 51ST TERRACE  
MIAMI, FL 33185

## New Mailing Address:

13395 SW 131 ST.  
SUITE B  
MIAMI, FL 33186

FEI Number: 16-1723429

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

ACOSTA, JUAN  
13395 SW 131 ST.  
SUITE B  
MIAMI, FL 33186 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: JUAN ACOSTA

08/30/2007

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: DPV ( ) Delete  
Name: ACOSTA, JUAN D  
Address: 16605 SOUTHWEST 51ST TERRACE  
City-St-Zip: MIAMI, FL 33185

Title: ST (X) Delete  
Name: ACOSTA, JUAN D  
Address: 16605 SOUTHWEST 51ST TERRACE  
City-St-Zip: MIAMI, FL 33185

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ACOSTA, JUAN D  
Address: 13395 SW 131 ST SUITE B  
City-St-Zip: MIAMI, FL 33186

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JUAN D. ACOSTA

PSDT

08/30/2007

Electronic Signature of Signing Officer or Director

Date