## 2006 FOR PROFIT CORPORATION

## Apr 03, 2006 8:00 am Secretary of State **ANNUAL REPORT** 04-03-2006 90361 009 \*\*\*150 00 DOCUMENT # P05000083829 I ONDON GENERAL CONSTRUCTION INC. 40042813 Principal Place of Business Mailing Address 16 SILVER OAK GR. KISSIMMEE, FL 34743 16 SILVER DAK CR. KISSIMMEE, FL 34743 3. Mailing Address 2. Principal Place of Business 2756 EAGLE CANYON OR SV. 2756 EAGLE CANYON DR Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/05) 02132006 Chg-P Applied For City & State 4. FEI Number City & State FL 72-160105 Not Applicable Kissimmee Kissimmee \$8.75 Additional Country Country Zip -34746 5. Certificate of Status Desired u spa Fee Required USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LONDONO, MIGUEL A Street Address (P.O. Box Number is Not Acceptable) 2756 EAGE CANYON DIL SO 16-SILVER OAK CR. KISSIMMEE, FL 34743 34746 Kissimmee Zip Code 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 bitle if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 10. Change ☐ Addition TITLE TITLE Delete LONDONO, MIGUEL A NAME NAME 2756 EAGLE CANYON DA STREET-ADDRESS 46 SILVER OAK OR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE, Pt. 34743 KISSIMMES, FL 34746 Change ☐ Addition VP TITLE ☐ Delete TITLE NAME LONDONO, JUAN P NAME 2756 EAGLE CANYON DR. SU. STREET ADDRESS STREET ADDRESS 16 SILVER OAK CR KISSMMEE, FL 34746 CITY-ST-ZIP KISSIMMEE, FL 34743 CITY-ST-ZIP D. Delete TITLE Ghange ... ☐ Addition TITLE NAME MUJICA, NANCY S NAME 2756 BAGLE CANYON DO. 50. 16 SILVER OAK CR STREET ADDRESS CIDITY ADORES CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE, FL 34743 KISSIMMEE, FL 34746 Change Addition TITLE HILE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TILE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 recipier 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 of the corporation or the rec changed, or on an attachm MIGHEL WADOND

SIGNATURE:

NAME OF SIGNING OFFICER OR DIRECTOR

02-13-06 407-414-4643

FILED

Daytime Phone #