

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90049 047 ***150.00

DOCUMENT # P05000084426	
1. Entity Name MASTER CRAFTSMAN CONSTRUCTION, INC.	

Principal Place of Business 3500 ROXANE BLVD. SARASOTA, FL 34235 US	Mailing Address 3500 ROXANE BLVD. SARASOTA, FL 34235 US
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2. Principal Place of Business - No P.O. Box # 2930 48TH DR E.	3. Mailing Address 2930 48TH DR E.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State BRADENTON, FL	City & State BRADENTON, FL
Zip 34203	Zip 34203
Country	Country

40072525



03272008 Chg-P CR2E034 (12/06)

4. FEI Number 01-0838698	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LOPEZ, ROBERTINA C 3500 ROXANE BLVD. SARASOTA, FL 34235	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2930 48TH DRIVE E. City BRADENTON FL Zip Code 34203
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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 <i>Robertina C Lopez</i>	(NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D,P MEDRANO, TRINIDAD M 3500 ROXANE BLVD. SARASOTA, FL 34235 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 2930 48TH DRIVE E. BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOPEZ, ROBERTINA C 3500 ROXANE BLVD. SARASOTA, FL 34235 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 2930 48TH DRIVE E. BRADENTON, FL 34203
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12. I hereby certify that the information supplied with this filing 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 receiver 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>Robertina C Lopez</i>	Date 04-08-08	Daytime Phone #
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