## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000095625

Title:

Name:

Address:

City-St-Zip:

TSD

( ) Delete

6209 W COMMERCIAL BLVD, SUITE 7

FORT LAUDERDALE, FL 33319 US

ESCOBAR, LUIS A JR.

FILED Aug 29, 2006 Secretary of State

Entity Name: ESCOBAR, ESCOBAR & HEREDIA CONTRACTORS, INC.					
Current Pr	incipal Place o	of Business:	New Principal P	New Principal Place of Business:	
6209 W COMMERCIAL BLVD SUITE 7 FORT LAUDERDALE, FL 33319					
Current Mailing Address:			New Mailing Ad	New Mailing Address:	
6209 W COMMERCIAL BLVD SUITE 7 FORT LAUDERDALE, FL 33319					
FEI Number:	20-3125064	FEI Number Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
ESCOBAR, LUIS A JR. 6209 W COMMERCIAL BLVD SUITE 7 FORT LAUDERDALE, FL 33319 US			6209 W CÓMMEI SUITE 7	ESCOBAR, LUIS R 6209 W COMMERCIAL BLVD SUITE 7 FORT LAUDERDALE, FL 33319 US	
The above in the State		ubmits this statement for the pu	rpose of changing its regi	stered office or registered agent, or both,	
SIGNATURE: LUIS R ESCOBAR				08/29/2006	
	Electronic	Signature of Registered Ager	t	Date	
		2)(b), F.S., the corporation did not Trust Fund Contribution ( ).	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CH/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ESCOBAR, LUÍS 6209 W COMME	Delete R RCIAL BLVD, SUITE 7 ALE, FL 33319 US	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	HEREDIA, JAIME 6209 W COMME	Delete : RCIAL BLVD, SUITE 7 ALE, FL 33319 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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.

Title:

Name:

Address:

City-St-Zip:

TSD

ESCOBAR, LUIS R

(X) Change ( ) Addition

6209 W COMMERCIAL BLVD, SUITE 7

FORT LAUDERDALE, FL 33319 US

SIGNATURE: LUIS R ESCOBAR Ρ 08/29/2006