2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000100228

AYATS, MARÍA

MIAMI, FL 33133

2921 SW 36TH AVENUE

Name:

Address:

City-St-Zip:

Entity Name: INFINITY CONSTRUCTION SERVICES INC

FILED Feb 05, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1730 BISC	AYNE BLVD		1730 BISCAYNE BLV	O	
#201	22122		# 201-W MIAMI, FL 33132		
MIAMI, FL 33132			·	,	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
4001 SW 128 AVENUE MIRAMAR, FL 33027			4001 SW 128TH AVEN MIRAMAR, FL 33027	4001 SW 128TH AVENUE MIRAMAR, FL 33027	
FEI Number	: 20-3175515	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
ARBOLED	DA, JULIO		ARBOLEDA, JULIO		
4001 SW 128 AVE				4001 SW 128TH AVENUE	
MIRAMAR	2, FL 33027	US	MIRAMAR, FL 33027	US	
I he above in the State SIGNATUI	e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both, 02/05/2009	
		nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title:	Р () Delete	Title:	() Change () Addition	
Name:	ARBOLEDA, J		Name:		
Address:	4001 SW 128		Address:		
City-St-Zip:	MIRAMAR, FL	33027	City-St-Zip:		
Title:	VP () Delete	Title:	() Change () Addition	
Name:	BERDUGO, JO	DSE	Name:		
Address:	4001 SW 128		Address:		
City-St-Zip:	MIRAMAR, FL	33027	City-St-Zip:		
Title:	S () Delete	Title:	() Change () Addition	
Name:	ALON, MARITZ	•	Name:		
Address:	4001 SW 128	AVE	Address:		
City-St-Zip:	MIRAMAR, FL	33027	City-St-Zip:		
Title:	т () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JULIO ARBOLEDA P 02/05/2009