2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 06, 2007 8:00 am Secretary of State

DOCUMENT # P05000117409  1. Entity Name B D E PLASTERING CORP.									04-20-20	007 902	00 001 *:	**150.00	
Principal Place of Business 9711 NW 126 TERR HIALEAH GARDENS, FL 33018			9711	Mailing Address 9711 NW 126 TERR HIALEAH GARDENS, FL 33018									
2. Principal P	lace of Busin	ness - No P.O. Box #	3. Maili	3. Mailing Address									
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.				04172007	Chg-P	CR2E	034 (12/06)		
City & State			City &	City & State				4. FEI Numb	er ED FOR	·	<del></del>	pplied For ot Applicable	
Zip		Country	Zip	Zip Cour		ntry	5. Certificate		e of Status Desired		\$8.75 Ad Fee Require		
6. Name and Address of Current F			nt Registered	Registered Agent				7. Name an	d Address of New	Registered	Agent		
GONZALE 9711 NW HIALEAH	126 TERR					Name Street Address (P.O. Box Number is Not Acceptable)							
		k,				City				FI	Zip Cod	le	
	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												
signature.	tions of regis	lered agent.  Lovia  or printed number of registrated agent	le . ra fre jone ri appoi	Daniel	E. Regelere	zalez d Agent eignehm	(P	recident	)	7	107		
FILE NOWILL FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees													
10.		OFFICERS AN	D DIRECTOR		11.			ADDITIONS	CHANGES TO OF	FICERS AN	D DIRECTOR	S IN 11	
ITTLE NAME STREET ADDRESS CITY-ST-ZIP	9711 NW	EZ, DANIEL 128 TERR GARDENS, FL 3301	я	C Delete							☐ Change	Addition	
TITLE NAME	V	EZ, BELKYS	<u>-</u>	☐ Delete	TITLE						Change	Addition	
STREET ADORESS CITY-ST-ZIP		126 TERR GARDENS, FL 3301	8			ET ADDRESS -ST-ZIP						Ì	
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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 eath; 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.													
SIGNAT	'URE: 🛓	SALVE ME TYPEGOR	PHYDRAGE	OF JOHNING OFFICER	Dan	<u>ziel (</u> a	onec	2182	71107	(305)	588->	829	