




7/5/2006-90002-043-\$150.00-\$150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000120428					
1. Entity Name GODOY CONSTRUCTION INC.					
Principal Place of Business 300700 SW 147 AVENUE HOMESTEAD, FL 33033			Mailing Address 300700 SW 147 AVENUE HOMESTEAD, FL 33033		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	03302006 Chg-P CR2E034 (11/05)	
6. Name and Address of Current Registered Agent				4. FEI Number	
GODOY, JOSE 300700 SW 147 AVENUE HOMESTEAD, FL 33033				20-3405907	
				Applied For <input type="checkbox"/> Not Applicable	
7. Name and Address of New Registered Agent				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Name				City	
Street Address (P.O. Box Number is Not Acceptable)				FL 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  (NOTE: Registered Agent signature required when re-appointing) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GODOY, JOSE		NAME		
STREET ADDRESS	300700 SW 147 AVENUE		STREET ADDRESS		
CITY-ST-ZIP	HOMESTEAD, FL 33033		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GODOY, SANTOS		NAME		
STREET ADDRESS	300700 SW 147 AVENUE		STREET ADDRESS		
CITY-ST-ZIP	HOMESTEAD, FL 33033		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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:  (NOTE: Signature and typed or printed name of signing officer or director required)					
Date Daytime Phone #					

jc 8/25

GODOY CONSTRUCTION, INC.
JOSE GODOY

30070 SW 147 AVENUE
HOMESTEAD, FLORIDA 33033
USA

Phone 786-412-8225

July 31, 2006

Annual Reports Section
PO Box 6327
Tallahassee, Florida 32314

Dear Associate,

RE: Reference Number: P05000120428

I am in receipt of your letter dated 07/06/06 and I am requesting that the \$400.00 charge be waived because I was not aware that I had to pay each year to renew the corporation. This was not explained to me by the person who did the corporation to me. I did not receive a renewal form either otherwise I would have taken care of this promptly.

If you should need any additional information please do not hesitate to get in contact with me at the above address or telephone number.

Anything that you can do to expedite this matter would be greatly appreciated.

Sincerely,



Jose Godoy