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FILED
Jun 22, 2006 8:00 am
Secretary of State

05-08-2006 90281 008 ***150.00

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P05000124523					
1. Entry Name US ALL CONSTRUCTION INTERNATIONAL, INC.					
Principal Place of Business 218 SANTILLAN SUITE 1 CORAL GABLES, FL 33134			Mailing Address POST OFFICE BOX 141307 CORAL GABLES, FL 33134		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145				7. Name and Address of New Registered Agent Name: <u>LUIS LORENZO</u> Street Address (If P.O. Box Number is Not Acceptable): <u>218 SANTILLAN SUITE 1</u> <u>CORAL GABLES</u> <u>33134</u> City: <u>FL</u> Zip Code: <u>33134</u>	
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 registering)					
FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD LORENZO, LUIS 218 SANTILLAN, SUITE 1 CORAL GABLES, FL 33134	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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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 without other like empowered.					
SIGNATURE: <u>LUIS LORENZO</u> 429-06					

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04282006 Chg-P CR2E034 (11/05)

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 Applied For Not Applicable

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