

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

8/28/2006-90003-013-\$150.00-\$150.00

DOCUMENT # P05000131477

1. Entity Name

EDDIE & CARMEN'S - BOOM BOOM CONSTRUCTION INC.



FILED

06 SEP 19 PM 4:13

Principal Place of Business
233 HARVEY STREET
PUNTA GORDA FL 33950

Mailing Address
233 HARVEY STREET
PUNTA GORDA FL 33950

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

Same as above

3. Mailing Address

Same as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

WOWR

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

2nd MOORE

CR2E034 (4/06)

6. Name and Address of Current Registered Agent

LABRADA, FRANK
6850 CORAL WAY
SUITE 207
MIAMI FL 33155

7. Name and Address of New Registered Agent

Name CARLOS B. Morales

Street Address (P.O. Box Number is Not Acceptable)

233 HARVEY STREET

City PUNTA GORDA 33950

FL

Zip Code 33950

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

Carlos B. Morales

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY September 6, 2006

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	MORALES, CARMEN S	
STREET ADDRESS	23 HARVEY STREET	
CITY- ST- ZIP	PUNTA GORDA FL 33095	
TITLE	V	☐ Delete
NAME	MORALES, EDWARD JR.	
STREET ADDRESS	23 HARVEY STREET	
CITY- ST- ZIP	PUNTA GORDA FL 33095	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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:

Carlos B. Morales

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08-20-06

Date

(954) 540 5503

Daytime Phone #

jc 9/21