

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000147774

FILED  
May 20, 2009  
Secretary of State

Entity Name: ALMENDAREZ BROTHERS CONSTRUCTION, INC.

## Current Principal Place of Business:

3921 ROBBINS AVENUE  
ORLANDO, FL 32808

## New Principal Place of Business:

2911 SQUIRE OAKS CT  
ST. CLOUD, FL 34769

## Current Mailing Address:

3921 ROBBINS AVENUE  
ORLANDO, FL 32808

## New Mailing Address:

2911 SQUIRE OAKS CT  
ST. CLOUD, FL 34769

FEI Number: 20-3743248

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALMENDAREZ, MARLIX  
3921 ROBBINS AVENUE  
ORLANDO, FL 32808 US

## Name and Address of New Registered Agent:

ALMENDAREZ, MARLIX  
2611 SQUIRE OAKS CT.  
ST. CLOUD, FL 34769 US

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.

SIGNATURE: MARLIX ALMENDAREZ

05/20/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ALMENDAREZ, MARLIX  
Address: 3921 ROBBINS AVENUE  
City-St-Zip: ORLANDO, FL 32808

Title: VP (X) Delete  
Name: ALMENDAREZ, MARTIN  
Address: 1112 SOUTH MAGNOLIA DRIVE APT # C205  
City-St-Zip: TALLAHASSEE, FL 32301

Title: SEC (X) Delete  
Name: CASTRO, JORGE A  
Address: 1112 SOUTH MAGNOLIA DRIVE APT # B204  
City-St-Zip: KISSIMMEE, FL 32301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ALMENDAREZ, MARTIN  
Address: 2911 SQUIRE OAKS CT  
City-St-Zip: ST. CLOUD, FL 34769

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: MARTIN ALMENDAREZ

PRES

05/20/2009

Electronic Signature of Signing Officer or Director

Date