2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000150092

1. Entity Name
AMERICA'S FIVE STAR GENERAL CONTRACTORS INC.



FILED Jan 18, 2008 08:00 AM **Secretary of State**

Principal Place of Business

Mailing Address

6044 STRAWBERRY FIELDWAY LAKE WORTH, FL 33463

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01102008

No Chg-P

CR2E034 (11/05)

4. FEI Number 22-3918016 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145

DO NOT WRITE IN THIS SPACE

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 MADUSUDAN DATT RAMMAUTH M. Com-act 01-10-08 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algusture required when renetating) DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	,
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD RAMNAUTH, MADUSUDAN D 6044 STRAWBERRY FIELDSWAY LAKE WORTH, FL 33463				U00000788783 01/18/08-80052-015 150.00
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	VSD RAMNAUTH, DOOLMATE 6044 STRAWBERRY FIELDSWAY LAKE WORTH, FL 33463	.,			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				in '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,			
TITLE 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.					