2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000040692

1. Entity Name

SOUTHERN LATITUDES CONSTRUCTION INC



FILED Apr 03, 2008 08:00 Al Secretary of State

Principal Place of Business

857 BIG PINE AVE. BIG PINE KEY, FL 33043 Mailing Address

857 BIG PINE AVE.

BIG PINE KEY, FL 33043



DO NOT WRITE IN THIS SPACE

02072008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-4556655

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

SERGI, FRANK R 857 BIG PINE AVE. BIG PINE KEY, FL 33043

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plions of registered agent.	ourpose of changing its registere	d office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and acc	ept
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE Registered	Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000878868 04/14/08-80073-004 150.00	
10. OFFICERS AND DIRECT		CTORS		LE CENSEMBE		680
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SERGI, FRANK R 857 BIG PINE AVE. BIG PINE KEY, FL 33043					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SERGI, HOLLY A 857 BIG PINE AVE. BIG PINE KEY, FL 33043					
TITLE NAME STREET ADDRESS CITY-SI-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS				IN	THIS SPACE	

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: _____

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MANK R. SUGI - FRANK R. SERGI - PRESIDENT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 3/14/08 (305)797-1079
Date Daylore Phone #