

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2007 8:00 am
Secretary of State

03-05-2007 90061 016 ***150.00

DOCUMENT # P06000105936

1. Entity Name
JUST ONE CONSTRUCTION INC



40060004

Principal Place of Business
1474 SUNSHADOW DR
106
CASSELBERRY, FL 32707

Mailing Address
1474 SUNSHADOW DR
106
CASSELBERRY, FL 32707

2. Principal Place of Business - No P.O. Box #
2183 E. GLORIA DR

3. Mailing Address
2183 E. GLORIA DR.



02272007 Chg-P CR2E034 (12/06)

City & State
DELTONA, FL 32725

City & State
DELTONA, FL

4. FEI Number
20-5380418

Applied For
Not Applicable

Zip
32725

Country
USA

Zip
32725

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
VARELA, JOSE A
1474 SUNSHADOW DR
106
CASSELBERRY, FL 32707

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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	P	<input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	VARELA, JOSE A			NAME			
STREET ADDRESS	1474 SUNSHADOW DR SUITE 106			STREET ADDRESS	2183 E. GLORIA DR.		
CITY-ST-ZIP	CASSELBERRY, FL 32707			CITY-ST-ZIP	DELTONA, FL 32725		
TITLE	S	<input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	VARELA, JOSE A			NAME			
STREET ADDRESS	1474 SUNSHADOW DR SUITE 106			STREET ADDRESS	2183 E. GLORIA DR.		
CITY-ST-ZIP	CASSELBERRY, FL 32707			CITY-ST-ZIP	DELTONA, FL 32725		
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CITY-ST-ZIP				CITY-ST-ZIP			
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CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				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:

Jose A. Varela

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/27/07 321-277-5866

Date Daytime Phone #