

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000138180

FILED
Apr 15, 2008
Secretary of State

Entity Name: SUNCOAST BUILDERS & ROOFERS, INC.

Current Principal Place of Business:

6141 SW 22 CT
MIRAMAR, FL 33023

New Principal Place of Business:

Current Mailing Address:

6141 SW 22 CT
MIRAMAR, FL 33023

New Mailing Address:

FEI Number: 30-0390478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SALINAS, LUIS A
6141 SW 22 CT
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P. () Delete
Name: SALINAS, LUIS A
Address: 6141 SW 22 CT
City-St-Zip: MIRAMAR, FL 33023 US

Title: VP. () Delete
Name: URREA, LUIS A
Address: 19951 NW 2 ST
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: T () Delete
Name: SALINAS, MIGUEL A
Address: 6519 SW 21 STREET
City-St-Zip: MIRAMAR, FL 33023 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP. (X) Change () Addition
Name: SALINAS, JUAN C SR
Address: 6141 SW 22 CT
City-St-Zip: MIRAMAR, FL 33023 US

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

Title: S () Change (X) Addition
Name: JIMENEZ, LESLY M
Address: 6519 SW 21 ST
City-St-Zip: MIRAMAR, FL 33023

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: LUIS A. SALINAS

PTS

04/15/2008

Electronic Signature of Signing Officer or Director

_____ Date