2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State
04-30-2008 90190 042 ***158.75

DOCUMENT # P06000147336

1. Entity Name
ONCALL CONSTRUCTION RELATED SERVICES, INC.

Principal Place of Business	Mailing Address
~~3511 W. COMMERCIAL BLVD., SUITE 203~~ ~~FT. LAUDERDALE, FL 33309~~	PO BOX 16494 FORT LAUDERDALE, FL 33318

04172008 Chg-P CR2E034 (12/05)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
3800 W. Broward Blvd	
Suite, Apt. #, etc. 108	Suite, Apt. #, etc.
City & State Plantation FL	City & State
Zip 33312 Country	Zip Country

4. FEI Number 56-2625906 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

REID, SHARON A
5573 PACIFIC BLVD., SUITE 3503
BOCA RATON, FL 33433

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, 2008 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 NAME STREET ADDRESS CITY-ST-ZIP	P REID, SHARON A 5573 PACIFIC BLVD., SUITE 3503 BOCA RATON, FL 33433	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ~~JONES, KEISHA~~ ~~5573 PACIFIC BLVD., SUITE 3503~~ ~~BOCA RATON, FL 33433~~	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	~~Samuels~~ Vice President Oliver Samuels 1388 Greenridge Trail Atlanta GA ~~3008~~ 30058	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: [signature] 4/10/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2008 FOR PROFIT CORPORATION

ANNUAL REPORT

ATTACHMENT #6

DOCUMENT # P06000147336

1. Entity Name
ONCALL CONSTRUCTION RELATED SERVICES, INC.

60033783

Principal Place of Business	Mailing Address
~~3511 W. COMMERCIAL BLVD., SUITE 203~~ ~~FT. LAUDERDALE, FL 33309~~	PO BOX 16494 FORT LAUDERDALE, FL 33318

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
3800 W. BROWARD BLVD	
Suite, Apt. #, etc.: 108	Suite, Apt. #, etc.:
City & State: PLANTATION FL	City & State:
Zip: 33312 Country:	Zip: Country:

04172008 Chg-P CR2E034 (12/06)

4. FEI Number: 56-2625906 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
REID, SHARON A 5573 PACIFIC BLVD., SUITE 3503 BOCA RATON, FL 33433	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: _____ DATE
Signature, typed or printed name of individual agent and title if applicable (NOTE: Registered Agent signature required when changing)

FILE NOW!!! FEE IS $150.00
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	REID, SHARON A		NAME	
STREET ADDRESS	5573 PACIFIC BLVD., SUITE 3503		STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON, FL 33433		CITY-ST-ZIP	
TITLE	D	☐ Delete	TITLE	☒ Change ☐ Addition
NAME	~~JONES, KEISHA~~		NAME	~~Samuels~~ Vice President Oliver Samuels 1200 Greenridge Terr

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ONCALL CONSTRUCTION RELATED SERVICES, INC.
3511 W Commercial Blvd., Ste. 203
Ft Lauderdale, FL 33309

2074
63-643/670
BRANCH 0102

DATE 4/10/08

PAY TO THE ORDER OF Division of Corporations $ 158.75

One Hundred and Fifty Eight 75/100 DOLLARS

WACHOVIA
Wachovia Bank, N.A.
wachovia.com

FOR _____

SIGNATURE: _____ 7/10/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #