

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000051604

FILED
May 22, 2008
Secretary of State

Entity Name: CAVOUR CONSTRUCTION, CORP.

Current Principal Place of Business:

1717 SW 1ST WAY
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

14896 WILD FLOWER LN
DELRAY BEACH, FL 33446

Current Mailing Address:

1717 SW 1ST WAY
DEERFIELD BEACH, FL 33442

New Mailing Address:

14896 WILD FLOWER LN
DELRAY BEACH, FL 33446

FEI Number: 20-8938693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD.
POMPAÑO BEACH, FL 33064 US

Name and Address of New Registered Agent:

GENESIS ACCOUNTING SERVICES
1574 SE 3RD COURT
DEERFIELD BEACH, FL 33441 US

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: LUIZ CAVOUR

05/22/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAVOUR, LUIZ
Address: 1717 SW 1ST WAY
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VPD () Delete
Name: CAVOUR, NICHOLAS
Address: 1717 SW 1ST WAY
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: D () Delete
Name: CAVOUR, SIRLENE
Address: 1717 SW 1ST WAY
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAVOUR, LUIZ
Address: 14896 WILD FLOWER LN
City-St-Zip: DELRAY BEACH, FL 33446

Title: VPD (X) Change () Addition
Name: CAVOUR, NICHOLAS
Address: 14896 WILD FLOWER LN
City-St-Zip: DELRAY BEACH, FL 33446

Title: D (X) Change () Addition
Name: CAVOUR, SIRLENE
Address: 14896 WILD FLOWER LN
City-St-Zip: DELRAY BEACH, FL 33446

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: LUIZ CAVOUR

PD

05/22/2008

Electronic Signature of Signing Officer or Director

Date