

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P07000091617

**FILED**  
**Sep 22, 2008**  
**Secretary of State****Entity Name:** MAGNOLIA GENERAL CONSTRUCTION CORP.**Current Principal Place of Business:**901 SYMPHONY BEACH LN  
APOLLO BEACH, FL 33572 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 3618  
APOLLO BEACH, FL 33572 US**New Mailing Address:****FEI Number:** 26-0722439 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**LE, HIEU T  
901 SYMPHONY BEACH LN  
APOLLO BEACH, FL 33572 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

**OFFICERS AND DIRECTORS:****Title:** P ( ) Delete  
**Name:** LE, HIEU T  
**Address:** 901 SYMPHONY BEACH LN  
**City-St-Zip:** APOLLO BEACH, FL 33572 US**Title:** VP (X) Delete  
**Name:** MENDOZA, ALEX  
**Address:** P.O. BOX 3618  
**City-St-Zip:** APOLLO BEACH, FL 33572 US**Title:** VP (X) Delete  
**Name:** MENDOZA, GUSTAVO  
**Address:** P.O. BOX 3618  
**City-St-Zip:** APOLLO BEACH, FL 33572**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

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: HIEU LE

P

09/22/2008

Electronic Signature of Signing Officer or Director

Date