2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2008 8:00 am Secretary of State

DOCUMENT # P07000122297 1. Entity Name JUPITER ALL PHASE CONSTRUCTION INC.						S. Collins	04-18-2008 9	0037 04	8 ***150	0.00
Principal Place	e of Business	Mailing Ado	Iress							
6623 BREEZELOCK CT		6623 BRE	6623 BREEZELOCK CT			•				
JUPITER, FL		JUPITER, F	JUPITER, FL 33458 US				•			
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2. Principal P	lace of Business - No P.O. Box #	3. Mailing A	ddress 仏. 工人	<u>^ V:</u>	ANtow					
Suite, Apt. #, etc.		Suite, Apt	Suite, Apt. #, etc. STE 56-176			04152008	Chg-P	CR2E0	34 (12/06)	
City & State			City & State Supiter F/-			4. FEI Number	406909			plied For t Applicable
Zip	Country	Zip	58	Countr	у	5. Certificate	of Status Desired		8.75 Add	
	6. Name and Address of Curr	rent Registered Ag	ent	-		7. Name and	Address of New Re			
				1	Name			·×	*	
CINGOLAI				ŀ	Street Address (P.O. Box Number is Not Acceptable)					
JUPITER,	EZELOCK CT FL 33458				Street Address (P.O. Box Number is Not Acceptable)					
551 17211,										
					City			FL	Zip Code	9
	named entity submits this statementions of registered agent.	nt for the purpose o	f changing its re	egistere	d office or regis	tered agent, or bo	th, in the State of Flor	ida. I am f	amiliar with,	and accept
SIGNATURE_	ions or registered agent.									
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable.	(NOTE: F	Registered	Agent signature requi	ired when reinstating)		DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$55	' _	ection Campaigr ust Fund Contrib			5.00 May Be dded to Fees			·	
	ay 1, 2008 Fee will be \$55 OFFICERS A	' _				dded to Fees	CHANGES TO OFFI	CERS AND	DIRECTORS	S IN 11
After Ma	ay 1, 2008 Fee will be \$55 OFFICERS A	50.00 Tri		11.	- A	dded to Fees	CHANGES TO OFFIC	CERS AND	DIRECTORS	S IN 11
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indicated on this report or supplemental poort 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 redeliver or trusted 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 withhan addless, with all other like empowered.

SIGNATURE:

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/-/6-08 Daytime Ph

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