


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008 8:00 am
Secretary of State

03-26-2008 90023 009 ***150.00

DOCUMENT # P07000129690 1. Entity Name CANALS CONSTRUCTION CORPORATION			
Principal Place of Business 6543 DOG ROSE DRIVE WESLEY CHAPEL, FL 33544		Mailing Address 6543 DOG ROSE DRIVE WESLEY CHAPEL, FL 33544	
2. Principal Place of Business - No P.O. Box # 6543 DOG ROSE DR		3. Mailing Address 6543 DOG ROSE DR	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Wesley Chapel - FLA		City & State Wesley Chapel FLA	
Zip 33544		Zip 33544	
Country FLA		Country FLA	
4. FEI Number		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CANALS, RICHARD S 6543 DOG ROSE DRIVE WESLEY CHAPEL, FL 33544		7. Name and Address of New Registered Agent Name: RICHARD S CANALS (ORIGINAL) Street Address (P.O. Box Number is Not Acceptable): 6543 DOG ROSE DR City: Wesley Chapel FL Zip Code: 33544	
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: R.S. CANALS OWNER DATE: 3-15-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 <input type="checkbox"/> Delete CANALS, RICHARD S 6543 DOG ROSE DRIVE WESLEY CHAPEL, FL 33544	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: R.S. CANALS		Date: 3-15-08 Daytime Phone #: 813-787-0037	