

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000040794

FILED
Apr 30, 2012
Secretary of State

Entity Name: MAXCON CONSTRUCTION & RESTORATION INC.

Current Principal Place of Business:

3900 WOODLAKE BLVD.
200
GREENACRES, FL 33463

Current Mailing Address:

P.O. BOX 7556
DELRAY BEACH, FL 33482

New Principal Place of Business:

3900 WOODLAKE BLVD.
200
GREENACRES, FL 33463 US

New Mailing Address:

3900 WOODLAKE BLVD.
200
GREENACRES, FL 33463 US

FEI Number: 27-0156302 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DUENAS, DANILO
3900 WOODLAKE BLVD.
200
GREENACRES, FL 33463 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
Name: DUENAS, DANILO
Address: 3900 WOODLAKE BLVD.
City-St-Zip: GREENACRES, FL 33463

Title: VP
Name: PIEDRAHITA, CARLOS
Address: 3900 WOODLAKE BLVD.
City-St-Zip: GREENACRES, FL 33463 US

Title: MGR
Name: MANSDORF, PATRICIA V
Address: 3900 WOODLAKE BLVD.
City-St-Zip: GREENACRES, FL 33463

I hereby 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 all other like empowered.

SIGNATURE: DANILO DUENAS

P

04/30/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date