

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000044024

**FILED**  
**Jan 31, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA COAST MECHANICAL CONTRACTOR INC

**Current Principal Place of Business:**

4050 NW 135 ST  
BLDG 11 APT 15  
OPALOCKA, FL 33054

**New Principal Place of Business:**

**Current Mailing Address:**

4050 NW 135 ST  
BLDG 11 APT 15  
OPALOCKA, FL 33054

**New Mailing Address:**

**FEI Number:** 27-2648835

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DE LA C. ROMEU, JULIO  
4050 NW 135 ST  
BLDG 11 APT 15  
OPALOCKA, FL 33154 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:** DE LA C. ROMEU, JULIO  
**Address:** 4050 NW 135 ST BLDG 11 APT 15  
**City-St-Zip:** OPA LOCKA, FL 33054

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:** JULIO DE LA C. ROMEU

P

01/31/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date