## 2007 FOR PROFIT CORPORATION

## Mar 22, 2007 8:00 am Secretary of State ANNUAL REPORT 03-22-2007 90010 029 \*\*\*150.00 DOCUMENT # P95000022888 DNP BUILDERS, INC. 60027246 Principal Place of Business Mailing Address 2231 MILL TERRACE 2231 MILL TERRACE SARASOTA, FL 34231 SARASOTA, FL 34231 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03142007 CR2E034 (12/06) Cha-P Cilv & State City & State 4 FEI Number Applied For 65-0540635 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DIAZ, LORENZO Street Address (P.O. Box Number is Not Acceptable) 2231 MILL TERRACE SARASOTA, FL 34231 City Zip Code FL 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\_ Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PST TITLE Delete TITLE Addition DIAZ LORENZO NAME NAME STREET ADDRESS 2231 MILL TERRACE STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34231 CITY-ST-ZIP VPSD ☐ Change TITLE Defete TIDE ☐ Addition DIAZ, SANTOS NAME NAME 2231 MILL TERRACE STREET ADDRESS STREET ADDRESS City-ST-ZIP SARASOTA, FL 34231 CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE CASTILLO, PAULINO R NAME NAME STREET ADDRESS 1405 HONORE AVE STREET ADDRESS CITY-ST-7IP SARASOTA, FL 34232 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Defete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP

12. It hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supply mental 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 employered 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.

LORENZO DIAZ LORENZO DIAZ

**SIGNATURE** 

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRES

**FILED**