

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000044701

FILED
Jan 13, 2004
Secretary of State

Entity Name: BUADE CONSTRUCTION COMPANY, INC.

Current Principal Place of Business:

13741 SW 139 CT
MIAMI, FL 33186

New Principal Place of Business:

13741 SW 139 CT
#103
MIAMI, FL 33186

Current Mailing Address:

PO BOX 770292
MIAMI, FL 331770292

New Mailing Address:

FEI Number: 65-0672454 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUADE, BEATRIZ M
19701 SW 136 AVE
MIAMI, FL 33177 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BUADE, BEATRIZ
Address: 13741 SW 139 CT 103
City-St-Zip: MIAMI, FL 33186

Title: VPT () Delete
Name: BUDE, JUAN
Address: 13741 SW 139 CT 103
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: BUADE, BEATRIZ
Address: 13741 SW 139 CT 103
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: BUADE, BEATRIZ M
Address: 13741 SW 139 CT 103
City-St-Zip: MIAMI, FL 33186

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BUADE, BEATRIZ M
Address: 13741 SW 139 CT 103
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BEATRIZ M BUADE

P

01/13/2004

Electronic Signature of Signing Officer or Director

Date