

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000059126

Entity Name: PUBLIC WORKS CORP.

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

ONE S.E. THIRD AVENUE
STE 2250
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

ONE S.E. THIRD AVENUE
STE 2250
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-0679942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMKG REGISTERED AGENTS, INC.
2250 SUN TRUST INTERNATIONAL CENTER
ONE S.E. THIRD AVENUE
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

AMKE REGISTERED AGENTS LLC
2250 SUN TRUST INTERNATIONAL CENTER
ONE S.E. THIRD AVENUE
MIAMI, FL 33131 US

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: ARTURO J. ABALLI

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MR () Delete
Name: SHARPLES, DAVID
Address: 200 OCEAN LANE DRIVE APT 401
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: SHARPLES, DAVID
Address: 200 OCEAN LANE DRIVE APT 1102
City-St-Zip: KEY BISCAYNE, FL 33149

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DAVID SHARPLES

D

04/26/2007

Electronic Signature of Signing Officer or Director

Date