## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 05, 2007 08:00 AM **Secretary of State DOCUMENT # P96000067324** 1. Entity Name CABRERA CONSTRUCTION INC. Mailing Address Principal Place of Business P.O BOX 412 321 MARYLAND DRIVE LAKE WORTH, FL 33460 LAKE WORTH, FL 33460 No Chg-P CR2E034 (11/05) 01202007 DO NOT WRITE IN THIS SPACE Applied For Not Applicable 65-0686067 \$8.75 Additional 5. Certificate of Status Desired Fee Required CABRERA, HECTOR A DO NOT WRITE 1211 CRESTWOOD BLVD LAKE WORTH, FL 33460 IN THIS SPACE 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 title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000622345 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME CABRERA, HECTOR A STREET ADDRESS 1211 CRESTWOOD BLVD CITY-ST-ZIP LAKE WORTH, FL 33460 UNE CABRERA, JOSE SANTOS NAME STREET ADDRESS 321 MARY LANE DR CITY-ST-ZIP LAKE WORTH, FL 33460 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I 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 supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all organical empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/07

Daytime Pro

**FILED**