## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # P97000021362**

1. Entity Name

BANOV ARCHITECTURE AND CONSTRUCTION, INC.



US

Apr 21, 2008 8:00 am Secretary of State

**FILED** 

04-21-2008 90103 017 \*\*\*150.00

Principal Place of Business

Mailing Address

2975 20TH ST

VERO BEACH, FL 32960

US

2975 20TH ST

VERO BEACH, FL 32960

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0734265

02202008

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BANOV, ROBERT 2975 20TH ST VERO BEACH, FL 32960

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or both, in the	he State of Florida. I am familiar with, and accep	ŧ
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finan- Trust Fund Contribution.		\$5.00 May Be Added to Fees		_
10.	OFFICERS AND DIREC	CTORS				-
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUME, JOHN 1401 UNIVERSITY DR SUITE 402 CORAL SPRINGS, FL 33071					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BANOV, ROBERT 2975 20TH ST VERO BEACH, FL 32960					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BANOV, AMY 2975 20TH ST VERO BEACH, FL 32960			DO NO	OT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN TH	IS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filing 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 oath; that I am an officer or director of the corporation or the receiver or fustee 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 laddreps, with all other like empowered.

SIGNATURE:

TITLE

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.18.8 772-299-6565