

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # P97000022776**

1. Entity Name  
**KUSCH CONSTRUCTION, INC.**



Principal Place of Business  
**10130 NORTH LAKE BLVD  
STE 214-297  
WEST PALM BEACH, FL 33412**

Mailing Address  
**10130 NORTH LAKE BLVD  
STE 214-297  
WEST PALM BEACH, FL 33412**



04082008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0742236**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**KUSCH, LARRY W  
405 SOUTH RIVERSIDE DRIVE  
POMPANO BEACH, FL 33062**

**DO NOT WRITE  
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 renewing)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	KUSCH, LARRY W
STREET ADDRESS	405 SOUTH RIVERSIDE DRIVE
CITY-ST-ZIP	POMPANO BEACH, FL 33062
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000532418  
04/23/08-80065-022 150.00

**DO NOT WRITE  
IN THIS SPACE**

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 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 other like empowered.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**LARRY KUSCH**  
**PRIS.**

**4/9/08 561 7958797**  
Date Daytime Phone #