

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000022991

1. Entity Name
PEACE CONSTRUCTION, INC.



Principal Place of Business
**8101 PARK BLVD
MIAMI, FL 33126**

Mailing Address
**8101 PARK BLVD
#50
MIAMI, FL 33126**



02012008 No Chg-F CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0711713

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fees Required**

6. Name and Address of Current Registered Agent

**RUIZ, ROBERT J
8101 PARK BLVD
MIAMI, FL 33126**

**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 reappointing)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

**U00000501320
04/25/06-80057-023 158.75**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	RUIZ, ROBERT J
STREET ADDRESS	8101 PARK BLVD
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	D
NAME	RUIZ, ROBERTO N
STREET ADDRESS	8101 PARK BLVD
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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

4-6-06 305-552-7777

Date

Daytime Phone #