2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000022209

Entity Name: SOUTHERN CONSTRUCTION SERVICES, INC.

FILED Jan 17, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUITE 17	ORIDA MANGO				
WEST PA	.LM BEACH, FL	33409			
Current Mailing Address:			New Mailing Address:		
1500 N FLORIDA MANGO ROAD					
SUITE 17	IMPEACH EL	22.400			
VVESTPA	LM BEACH, FL	33409			
FEI Number: 65-0823273 FEI Number Applied For ()		FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()		
Name and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:	
837 HARÉ NORTH P	DOMINGO R BOUR ISLES PL ALM BEACH, F	L 33410 US	nurness of changing its registers	d office or registered agent, or both,	
	e of Florida.	ubililis tilis statement for the	purpose of changing its registere	d office of registered agent, or both,	
SIGNATU	RE:				
	Electron	c Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CASTRO, DOMI 837 HARBOUR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RODRIGUEZ, O	A MANGO ROAD, SUITE 17	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CASTRO, THAL 837 HARBOUR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	O/D () TOLEDO, JOSE 5869 SW 85TH MIAMI, FL 3314	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: THALLYGEE CASTRO S 01/17/2007