2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000092947

1. Entity Name

OAK CONSTRUCTION OF SOUTHEAST FLORIDA, INC.



FILED Jan 31, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

4000 SW 30TH AVE FORT LAUDERDALE, FL 33312 4000 SW 30TH AVE FORT LAUDERDALE, FL 33312



DO NOT WRITE IN THIS SPACE

01032008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0890219

S. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEDER, NATHAN I 1330 SOUTHEAST FOURTH AVENUE SUITE G FORT LAUDERDALE, FL 33316

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chains of registered agent.	anging its registered of	ffice or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.					
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Age	nt signature	required when reinstating)	DATE
FiL After Ma		n Campaign Financing und Contribution.	· 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				·
TITLE	P				
NAME	MEDRANO, CARLOS				
STREET ADDRESS	4000 SOUTHWEST 30TH AVENUE				•
C/TY-ST-ZIP	FORT LAUDERDALE, FL 33312				
TITLE	VP				
NAME	AYLOR, FORREST W	j			Mannananana
STREET ADORESS	40000 SW 30TH AVE	i i			U00000808388 02/07/08-80045-018 150.00
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312				02/01/00_00049_019 120°00
TITLE	ST				
NAME	MEDRANO, CHARLES				
STREET ADDRESS	4000 SW 30TH AVENUE			DO	NOT WOITE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312			טט	NOT WRITE
TITLE				INI "	THIS SPACE
NAME				113	I III3 SPACE
STREET ADDRESS					
CITY-ST-ZIP		ì			
THLE					
NAME					
CTOCCT ADDRESS					

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.

Q1/	2N/	LT I I	RF.

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 14 08

Daytime Phone #