# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 30, 2009**
**Secretary of State**

DOCUMENT# P99000007919

**Entity Name:** ATLANTIC COAST CONSTRUCTION, INC.

**Current Principal Place of Business:**

1001 N. FEDERAL HWY.
320
HALLANDALE, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

1001 N. FEDERAL HWY.
320
HALLANDALE, FL 33009

**New Mailing Address:**

**FEI Number: 65-0891825** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FEIN, DAWN
5821 SW 14 ST
PLANTATION, FL 33317 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: SIERRA, ALBERT J
Address: 2643 GULFSTREAM LANE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SVP ( ) Delete
Name: PERDIGON, ALBERTO
Address: 8281 NW 166 TER
City-St-Zip: MIAMI, FL 33015

Title: VP ( ) Delete
Name: HUERTA, ROBERT
Address: 3020 SW 13 CT
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: S ( ) Delete
Name: ACOSTA, MANULANI
Address: 2643 GULFSTREAM LN
City-St-Zip: FT. LAUDERDALE, FL 33312

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MANULANI ACOSTA S 04/30/2009

Electronic Signature of Signing Officer or Director Date