

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000009140

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: OLIVERA CONSTRUCTION, INC.

## Current Principal Place of Business:

5151 SOUTH LAKELAND DRIVE  
SUITE 8  
LAKELAND, FL 33813

## New Principal Place of Business:

## Current Mailing Address:

P.O BOX 7174  
LAKELAND, FL 338077174

## New Mailing Address:

FEI Number: 59-3550105

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OLIVERA, FELIPE LUIS  
6550 EAGLE RIDGE WAY  
LAKELAND, FL 33813 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: VD ( ) Delete  
Name: STANGL, ALEJANDRO R  
Address: 6950 TIFFANY OAKS DRIVE  
City-St-Zip: LAKELAND, FL 33813

Title: TD ( ) Delete  
Name: STANGL, ALICIA ELENA  
Address: 6950 TIFFANY OAKS DRIVE  
City-St-Zip: LAKELAND, FL 33813

Title: PD ( ) Delete  
Name: OLIVERA, FELIPE JOSE  
Address: 6739 CRESENT LAKE DRIVE  
City-St-Zip: LAKELAND, FL 33813

Title: VD ( ) Delete  
Name: OLIVERA, FELIPE L  
Address: 6550 EAGLE RIDGE WAY  
City-St-Zip: LAKELAND, FL 33813

Title: SD ( ) Delete  
Name: OLIVERA, MAGDALINE  
Address: 6550 EAGLE RIDGE WAY  
City-St-Zip: LAKELAND, FL 33813

## 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:

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: ALEJANDRO R. STANGL

VD

03/24/2009

Electronic Signature of Signing Officer or Director

Date