

FILED
Apr 12, 2007 08:00 AM
Secretary of State

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000081495	
1. Entity Name E & L CONCRETE FINISHERS, INC.	



Principal Place of Business PO BOX 236572 COCOA, FL 32923	Mailing Address PO BOX 236572 COCOA, FL 32923
---	---



01312007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3601035	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent THOMAS, LEON 3355 AMBERLY ST. COCOA, FL 32926	
--	--

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 _____ <small>Signature, title or printed name of registered agent and title of applicant (NOTE: Registered Agent sign this requirement when removing)</small>	DATE _____
--	------------

**FILE NOW!!! FEE IS \$160.00
After May 1, 2007 Fee will be \$680.00**

9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
--	--------------------------------

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST THOMAS, LEON 3355 AMBERLY ST. COCOA, FL 32926
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, LEON 3355 AMBERLY ST. COCOA, FL 32926
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GILMORE, DONNEL POINSETTE TRAILER PARK, LOT 295 COCOA, FL 32926
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRYANT, RONDY 4042 LAKE CIRCLE COCOA, FL 32926
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

U00000702384
04/20/07-80096-021 150.00

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 a 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: *x Leon Thomas* *Leon Thomas* 4-9-07 x321-634-6897

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #