2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000100216

DANIELLO CONSTRUCTION INC.



FILED Jul 06, 2006 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

2708 NORTH AUSTRALIAN AVENUE SUITE 9 WEST PALM BEACH, FL 33407

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DO NOT WRITE IN THIS SPACE

07052006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0969146 Applied For
Not Applicable

5. Certificate of Status Desired Sa.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DANIELLO, LOUIS J 2708 NORTH AUSTRALIAN AVENUE SUITE 9 WEST PALM BEACH, FL 33407 DO NOT WRITE IN THIS SPACE

				Township Consideration of the Action
8. The above the obligat	named entity submits this statement for the ions of registered agent.	purpose of changing its register	ed office or registered agent, or bo	oth, in the State of filoridas tam familiar with, and accept 07/06/06-80014-022 158 75
SIGNATURE.	Signature, typed or printed name of registered agent and title	a it applicable (AIOTS: Davideo	d Agent signature required when reinstating)	DATE
	Signatura, typed or printed harter or registered agent and an	r approade. (NOTE Hagisters	o Agent signature required when reinstailing)	T OAIE
		Election Campaign Finar Trust Fund Contribution.	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIRE	CTORS	1 0. in	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSDT DANIELLO, LOUIS J 2708 NORTH AUSTRALIAN AVENUE SUITE 9 WEST PALM BEACH, FL 33407			
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12. I hereby certify that the information supplied with this filling 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 giber like empowered.

Louis Denie 16

SIGNATURE: Succession

STREET ADDRESS CITY-ST-ZIP

NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-5-06

Ed 835-4788

Daytime Phone #