2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Feb 26, 2007 08:00 AM DOCUMENT # \$44618 **Secretary of State** 1. Entity Name POWER BUILDERS INC. Principal Place of Business Mailing Address 12301 S.W. 64 AVE PINECREST FL 33156 12301 S.W. 64 AVE PINECREST FL 33156 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 65-0256154 Not Applicable Zip Country Country Zıp \$8.75 Additional 5. Certificate of Status Desirod 6: Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FERNANDEZ, FEDERICO Stroot Address (P.O. Box Number is Not Acceptable) 12301 S.W. 64 AVE PINECREST FL 33156 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change HILE ☐ Delete TITLE Addition FERNANDEZ, FEDERICO NAME NAME 12301 S.W. 64 AVE U00000646408 STREET ADORESS STREET ADDRESS PINECREST FL 33156 CITY-ST-ZIP 03/06/07-80031-020 150.00 CHY-SI-ZIP TITLE ☐ Change ☐ Addition Delete BILE FERNANDEZ, FEDERICO NAME NAME 12301 S.W. 64 AVE STREET ADDRESS STREET ADDRESS PINECREST FL 33156 CITY-ST-7IP CHY-ST-ZIP ☐ Delete TITLE ☐ Change Addition ROUX-FERNANDEZ, NATALIE NAME 12301 S.W. 64 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PINECREST FL 33156 CHY-SI-7IP THILE Delete ☐ Change TITLE Addition FERNANDEZ, FEDERICO NAME NAME 12301 S.W. 64 AVE STREET ADDRESS STREET ADDRESS PINECREST FL 33156 CITY-ST-7IP CHY-S1-7IP THELE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY - ST - 7IP TITLE ☐ Change ☐ Delete TIFLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

her like empowered.

does not qualify for the exemptions contained in Section 119, Florida Statutos. I further certify that the information

ye and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director vered to exocute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11

12. I heroby certify that the information supplied with this fling

if changed, or on an apachi

indicated on this report or supplemental report is true and a of the corporation or the receiver or trusteel empowered to.