## **2008 FOR PROFIT CORPORATION**

## **ANNUAL REPORT DOCUMENT # V04216** 1. Entity Name REPUBLIC CONSTRUCTION & DEVELOPMENT CORP.



**FILED** Feb 28, 2008 8:00 am Secretary of State

02-28-2008 90016 019 \*\*\*158.75

				1137					
Principal Place of Business 2449 QUANTUM BLVD BOYNTON BEACH, FL 33426		Mailing Address 2449 QUANTUM BLVD BOYNTON BEACH, FL 33426		·	<u>ម</u> ូប 	U • • -			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01072008	Chg-P	CR2E0	34 (12/06)	
City & State		City & State			4. FEI Numbe				plied For t Applicable
Zip	Country	Zip	Country			of Status Desired		\$8.75 Add Fee Require	litional
	6Name and Address of Current	Registered Agent			7. Name and	Address of New F	Registered_/	Agent	
							•		
CHAVES, RICHARD 515 NORTH FLAGLER DRIVE 19TH FLOOR		Street Addr		.ddress (	P.O. Box Numbe	er is Not Acceptable	e)		
	LM BEACH, FL 33401								
			City				FL	Zip Code	a
	named entity submits this statement fo tions of registered agent.	r the purpose of changing its r	egistered office o	r registe	red agent, or bot	h, in the State of Flo	orida, lam	familiar with,	and accept
SIGNATURE.	•								
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signal	ture required	d when reinstating)		DATE	. 1	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0	9. Election Campaig Trust Fund Contri		<b>\$5</b> Add	.00 May Be led to Fees				
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11
TITLE	Р	☐ Delete	TITLE	P				Change	Addition
NAME	NEUBARTH, FRED		NAMÉ	NEU	BARTH, FR	aryd Lo			
STREET ADDRESS CITY-ST-ZIP	2013 COLLIER AVE. LAKE WORTH, FL 33461		STREET ADDRESS CITY-ST-ZIP			H, FL 33426			
TITLE	VPS	□ Delete	TITLE	0.4.				Change	Addition
NAME	NEUBARTH, STEVEN		NAME						
STREET ADDRESS	2449 QUANTUM BLVD		STREET ADDRESS						
CITY-ST-ZIP	BOYNTON BEACH, FL 33426		CITY-ST-ZIP				-		
TITLE		☐ Delete	TITLE					☐ Change	Addition
NAME STREET ADDRESS			NAME STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ Delete	TITLE					☐ Change	Addition
NAME			NAME						
STREET ADDRESS	1		STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP		<u> </u>			Change	- Addition
TITLE		Delete	TITLE NAME					☐ Change	☐ Addition
NAME STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ Delete	TITLE					☐ Change	Addition
NAME			NAME						
STREET ADDRESS			STREET ADORESS						
CITY-ST-7IP	1		CITY-ST-ZIP	1					

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 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 other like empowered.

SIGNATURE:

STEUEN NEUBARTH V.P.

561.733.0052