

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V61358

FILED
Apr 23, 2004
Secretary of State

Entity Name: C SQUARED CONSTRUCTION, INC.

Current Principal Place of Business:

7116 SW 47 STREET
MIAMI, FL 33155 US

New Principal Place of Business:

Current Mailing Address:

7116 SW 47 STREET
MIAMI, FL 33155 US

New Mailing Address:

FEI Number: 65-0354211 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CASTELLANOS, CARLOS M.
7116 SW 47 STREET
MIAMI, FL 33155 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: P () Delete
Name: CASTELLANOS, CARLOS, M.
Address: 8241 SW 89 CT
City-St-Zip: MIAMI, FL

Title: VP () Delete
Name: CANDELA, HILARY J
Address: 720 SANTURCE AVE
City-St-Zip: CORAL GABLES, FL

Title: VP () Delete
Name: CASTELLANOS, JORGE L.
Address: 10905 S.W. 84TH COURT
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CASTELLANOS, CARLOS, M.
Address: 10985 SW 84 AVE
City-St-Zip: MIAMI, FL 33156

Title: VP (X) Change () Addition
Name: CANDELA, HILARY J
Address: 720 SANTURCE AVE
City-St-Zip: CORAL GABLES, FL 33143

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARLOS M CASTELLANOS

P

04/23/2004

Electronic Signature of Signing Officer or Director

_____ Date