2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V67940

1. Entity Name
EASTON CONSTRUCTION COMPANY, INC.



Principal Place of Business

10165 N.W. 19 STREET MIAMI, FL 33172

Mailing Address

10165 N.W. 19 STREET MIAMI, FL 33172

FILED Apr 26, 2007 08:00 AM Secretary of State



03262007 DO NOT WRITE IN THIS SPACE

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0363437 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EASTON, EDWARD W 10165 N.W. 19 STREET MIAMI, FL 33172

DO NOT WRITE IN THIS SPACE

			IN THIS STAGE		
	named entity submits this statement for the prions of registered agent.	urpose of changing its registered offi	ice or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registered Agent	signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
11.	OFFICERS AND DIREC	TORS			
TITE.E Name Street address City-St-Zip	CDP EASTON, EDWARD W. 10165 N.W. 19 STREET MIAMI, FL 33172				
TITLE NAME Street Address City-St-Zip					U00000734090 05/09/07-80112-013 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME Street Address City+St-Zip				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY+ST-ZIP					
12. I hereby	certify that the information supplied with this fil	ing does not qualify for the exemption	ons co	ntained in Chapter 119	9, 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 all other like empowered.

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward W. Eastor