


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90097 034 ***150.00

DOCUMENT # K20694 1. Entity Name HANS T. BERGGREN BLDG., INC.	
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Principal Place of Business 2800 E. COMMERCIAL BLVD. #208 FT LAUDERDALE, FL 33308	Mailing Address 2800 E. COMMERCIAL BLVD. #208 FT LAUDERDALE, FL 33308
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DO NOT WRITE IN THIS SPACE

40047417



01302007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0002705	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 KATZ, ALLEN H
 2800 E. COMMERCIAL BLVD
 #208
 FT LAUDERDALE, FL 33308

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BERGGREN, HANST 11 CHRISTIE HILL RD DARIEN, CT 06820
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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: *Hans T. Berggren* **HANS BERGGREN** ^{03/28/07} 203-952-6163
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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ATTACHMENT

Your agent

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SIGNATURE: *Hans T. Berggren* Hans T. Berggren *03/28-07*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #