## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 12, 2004 08:00 AM Secretary of State

DOCUMENT # 583043  1. Entity Name L & G BUILDERS INC.		
Principal Place of Business	Mailing Address	
1333 DIPLOMAT PKWY. Hollywood, Fl 33019-2215	1333 DIPLOMAT PKWY. HOLLYWOOD, FL 33019-2215	

03222004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1935363 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE GALIANO, SANDRA 1333 DIPLOMAT PKWY. HOLLYWOOD, FL 33020 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 Signature, typed or printed name of registered agent and tyle if applicable. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Ubblicher 18:48 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 理对证据的证据。1905年1905 OFFICERS AND DIRECTORS 10. TITLE GALIANO, SANDRA NAME STREET ADDRESS 1333 DIPLOMAT PKWY HOLLYWOOD, FL CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP RILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal affect 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PLANS PRES (DENT 3/31/04)

Date 1/3/1/04