


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2004 08:00 AM
Secretary of State

DOCUMENT # F20859
 1. Entity Name
CONTRACT CONSTRUCTION, INC.



Principal Place of Business
 1193 ENTERPRISE DR
 UNIT 105
 PT CHARLOTTE, FL 33953 US

Mailing Address
 1193 ENTERPRISE DR
 UNIT 105
 PT CHARLOTTE, FL 33953 US

DO NOT WRITE IN THIS SPACE



01072004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2060804

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent

ALBRECHT, ARTHUR
1313 HARBOR BLVD
PORT CHARLOTTE, FL 33952

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9. 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 _____ DATE _____
Signature, type or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature is required when changing office)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	ALBRECHT, ARTHUR
STREET ADDRESS	1313 HARBOR BLVD
CITY-ST-ZIP	PORT CHARLOTTE, FL 00000
TITLE	VS
NAME	ALBRECHT, MARY CATHERINE
STREET ADDRESS	1313 HARBOR BLVD.
CITY-ST-ZIP	PORT CHARLOTTE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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UCR 0000187
 01/16/04-10023-103 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(1), 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:  **Arthur Albrecht** **1/14/04** **941-624-2044**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAY: PHONE: