2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 25, 2005 08:00 AM Secretary of State **DOCUMENT # 319689** 1. Entity Name D. I. C. COMMERCIAL CONSTRUCTION CORP. Principal Place of Business Mailing Address 5260 SW 8 ST PO BOX 19388 PLANTATION FL 33317 US PLANTATION FL 33318 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State Applied For 4. FEI Number 59-1212519 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SEAL, RUSSELL R. JR. Street Address (P.O. Box Number is Not Acceptable) 2591 SE MARSEILLE ST PT ST LUCIE FL 34952 City Zip Code 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 | am familiar with, and accept the obligations of registered agent. SIGNATURE Squature typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. PTD Change Addition THLE Delete THEE U000008329248 SEAL, ROGER E. NAME NAME 04/25/05-80107-016 150.**00** 5260 SW 8TH ST STREET ADDRESS STREET ADDRESS CITY - ST - ZIP PLANTATION, FL 00000 CITY-ST-ZIP HILE Defete ☐ Change ☐ Addition Total SEAL, RUSSELL R. JR. NAME STREET ADDRESS 2591 SE MARSEILLE ST STREET ADDRESS CHY-ST-ZIP PT ST LUCIE FL 34952 CLTY-ST-ZIP Delete ☐ Change ☐ Addition TITLE SD Hilber NAME NAME SEAL, MARY STREET ADDRESS 2591 SE MARSEILLE ST STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP PT ST LUCIE FL 34952 HILE ☐ Delete TITLE ☐ Change ☐ AddItion NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP ☐ Change Addition THILE ☐ Delete TIFLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-32 Detete THLE THE ☐ Change ☐ Addition NAME NAM'E STREET ADDRESS STREET ADDRESS CITY ST-7(P CHY-ST-ZIP 12. Thereby certify that the information supplied with this filting 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 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

FILED

SIGNATURE: Par Elea Roger E. Seal April 22, 2005 954-316-7373

changed, or on an attachment with an address, with all other like empowered.