

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2004 8:00 am
Secretary of State

01-30-2004 90071 027 ***150.00

DOCUMENT # 520250

1. Entity Name
TOKA IV CONSTRUCTION COMPANY, INC.



Principal Place of Business
**151 SW 5TH CT.
POMPANO BEACH, FL 33060**

Mailing Address
**PO BOX 9297
CORAL SPRINGS, FL 33065**

2. Principal Place of Business
10194 ROYAL PALM BLVD
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.



01132004 Chg-P CR2E034 (10/03)

City & State
CORAL SPRINGS, FL
Zip
33065

City & State
Country

4. FEI Number
59-1722817
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**PASALODOS, DAMASO J.
10194 ROYAL PALM BLVD
CORAL SPRINGS, FL 33075**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
10194 ROYAL PALM BLVD
City
FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, 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
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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PASALODOS, JOSE
3820 NW 3RD TERRACE
POMPANO BEACH, FL** ☒ Delete

VSD
NAME
STREET ADDRESS
CITY-ST-ZIP
**PASALODOS, DAMASO L.
3820 NW 3RD TERRACE
POMPANO BEACH, FL** ☐ Delete

PSD
NAME
STREET ADDRESS
CITY-ST-ZIP
**PASALODOS, DAMASO J.
3820 NW 3RD TERRACE
POMPANO BEACH, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**10194 ROYAL PALM BLVD
CORAL SPRINGS, FL 33065** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**10194 ROYAL PALM BLVD
CORAL SPRINGS, FL 33065** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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 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

1/20/04 954-6500394
Date Daytime Phone #