## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 12, 2005 08:00 AM Secretary of State DOCUMENT # G24091 HAB CONSTRUCTION, INC. Principal Place of Business Mailing Address 7442 CALOOSA DRIVE 7442 CALOOSA DRIVE BOKEELIA, FL 33922 BOKEELIA, FL 33922 ÚS 02102005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2276569 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BOIES, HARRY A, JR DO NOT WRITE 7442 CALOOSA DR BOKEELIA, FL 33922 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 egent and title if applicable. (NOTE Registered Agent signature required when reinstating) 9. Flection Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE BOIES, HARRY A JR. NAME 7442 CALOOSA DR STREET ADDRESS BOKEELIA, FL 33922 CITY-ST-ZIP TITLE BOIES, HARRY A, JR U00000227119 NAME 02/12/05-80043-017 150.00 7442 CALOOSA DR STREET ADDRESS CITY-ST-ZIP BOKEELIA, FL 33922 JUILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ACCRESS 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)(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 cath, 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:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-05 239-283-9

FILED