2005 FOR PROFIT CORPORATION ANNUAL REPORT

01-27-2005 90043 020 ***150.00 DOCUMENT # G52397 S C SCOTT CONSTRUCTION, INC. Principal Place of Business Mailing Address 4291 N DIXIE HWY C/O RANDALL M. SCOTT 40007283 4291 N. DIXIE HWY. 4291 N. DIXIE HWY. POMPANO BEAHC, FL 33064 POMPANO BEACH, FL 33064 2. Principal Place of Business 3. Mailing Address 4291 North Dixie Highway 4291 North Dixie Highway Suite, Apt. #, etc. Suite, Apt. #, etc. 01192005 Chg-P CR2E034 (10/03) Applied For City & State 4. FEI Number Deerfield Beach, Fl. 59-2311032 Not Applicable. Deerfield Beach Country Country \$8.75 Additional 5. Certificate of Status Desired 33064 USA Fee Required USA 33064 7. Name and Address of New Registered Agent -6. Name and Address of Current Registered Agent Randall M. Scott (Address Change only) SCOTT, RANDALL MA Street Address (P.O. Box Number is Not Acceptable) 4291 N. DIXIE HWY. 4291 North Dixie Highway POMPANO BEACH, FL 33064 City Deerfield Beach ^Z33064 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 lamiliar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and tille if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Address Change ☐ Delete TITLE P. SCOTT, RANDALL M NAME NAME Scott, Randall M. 4291 N.DIXIE HWY STREET ADDRESS STREET ADDRESS 4291 North Dixie Highway POMPANO BCH, FL 00000, CITY-ST-7IP CITY-ST-ZIP Deerfield Beach, Florida 33064 Addition ☐ Defete TITLE TITLE NAME SCOTT, BARBARA 4111 ARTHURIUM AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LANTANA, FL 33462 ☐ Addition ☐ Delele TITLĒ . Change TITLE MCCLENIN, PATRICK NAME NAME STREET ADORESS 235 NE 24TH AVENUE #2 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP POMPANO BEACH, FL 33064 Addition TITLE ☐ Delete DILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. Thereby 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 il changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

NTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jan 27, 2005 8:00 am

Secretary of State