

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H65881

FILED  
Jun 30, 2007  
Secretary of State

Entity Name: POLYPHASE CONSTRUCTION, INC.

## Current Principal Place of Business:

2096 WILD OKE CL.  
KISSIMMEE, FL 34746 US

## New Principal Place of Business:

2096 WILD OAK CT.  
KISSIMMEE, FL 34746 US

## Current Mailing Address:

2096 WILD OKE CL.  
KISSIMMEE, FL 34746 US

## New Mailing Address:

2096 WILD OAK CT.  
KISSIMMEE, FL 34746 US

FEI Number: 59-2548749

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILKEN, CHAD L  
2096 WILD OKE CL  
KISSIMMEE, FL 34746 US

## Name and Address of New Registered Agent:

WILKEN, CHAD L  
2096 WILD OAK CT  
KISSIMMEE, FL 34746 US

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.

SIGNATURE: CHAD WILKEN

06/30/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: WILKEN, CHAD L  
Address: 2096 WILD OKE CL  
City-St-Zip: KISSIMMEE, FL 34746 FL

Title: VP ( ) Delete  
Name: WILKEN, GEORGE  
Address: 519 LAK AVE  
City-St-Zip: ORLANDO, FL 32801

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHAD WILKEN

PRES

06/30/2007

Electronic Signature of Signing Officer or Director

Date