


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 14, 2005 08:00 AM
Secretary of State

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| DOCUMENT # K16226 |  |
| 1. Entity Name FINE LINE CONSTRUCTION & ELECTRIC, INC. | |

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| Principal Place of Business 3071 NORTH DIXIE HIGHWAY POMPANO BEACH, FL 33064 US | Mailing Address P.O. BOX 1452 BOCA RATON, FL 33429 |
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04082005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-0033228 | Applied For <input type="checkbox"/> No* Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent HUMMEL, JOSEPH D 3841 NE 24TH AVE LIGHTHOUSE POINT, FL 33064 |
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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 reissuing) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$350.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P HUMMEL, JOSEPH PO BOX 1452 BOCA RATON, FL 33429 |
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04/14/05-80086-016 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Joseph Hummel 4/7/05 954-786-8006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #