2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K46453

Entity Name: FRANK DISALVO & SONS, INC.

FILED Apr 20, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

1895 N. PINE ISLAND PLANTATION, FL 33322

Current Mailing Address: New Mailing Address:

1895 N. PINE ISLAND RD. PLANTATION, FL 33322 US

FEI Number: 65-0100110 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DISALVO, RALPH J
143 N.W. 117 AVENUE
PLANTATION, FL 33325 US
DISALVO, RALPH J
11330 N.W. 6TH STREET
PLANTATION, FL 33325 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: 04/20/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 DISALVO, RALPH J
 Name:
 DISALVO, RALPH J

 Address:
 143 N.W. 117 AVENUE
 Address:
 11330 N.W. 6TH STREET

 Address:
 143 N.W. 117 AVENUE
 Address:
 11330 N.W. 6TH STREET

 City-St-Zip:
 PLANTATION, FL 33325
 City-St-Zip:
 PLANTATION, FL 33325

Title: VPST () Delete Title: D (X) Change () Addition Name: DISALVO, RALPH Name: RIOS, CHARLIE

Address: 143 N.W. 117TH AVENUE Address: 4703 N.W. 121ST AVENUE
City-St-Zip: PLANTATION, FL 33325 City-St-Zip: CORAL SPRINGS, FL 33076

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RALPH J DISALVO D 04/20/2005