2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE

Jan 31, 2005 08:00 AM **DOCUMENT # K69864** Secretary of State 1. Entity Name PANKOWSKI CONSTRUCTION COMPANY, INC. Principal Place of Business Mailing Address 11359 S.W. 13TH ST DAVIE FL 33325 11359 S.W. 13TH ST DAVIE FL 33325 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) 1st MOORE City & State 4. FEI Number Applied For City & State 65-0146166 Not Applicable Country \$8.75 Additional Zip Country Ζip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PANKOWSKI, GARY Street Address (P.O. Box Number is Not Acceptable) 11359 S.W. 13TH ST DAVIE FL 33325 City 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 teinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 11. ☐ Change ☐ Addition THLE 🔲 Delete THILE U00000206053 PANKOWSKI, GARY NAME NAME 01/31/05-80067-017 150.00 11359 S.W. 13TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DAVIE FL 33325** CITY-S1-ZIP ☐ Delete ☐ Change Addition 11111 PANKOWSKI, RICHARD MAME NAME STREET ADDRESS 11700 SW 9 COURT STREET ADDRESS CITY-ST-ZIP DAVIE FL 33325 CITY-ST-7IP Change Addition TITLE Delete THEE NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TETT F TITLE MANA NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete HTLE HILE NAME NAME STREET ADDRESS STREET ADDRESS City-ST-ZIP CITY-ST-71P TITLE ☐ Change Addition Delete HILE NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CHY-SI-ZIP 12. I hereby 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 suppliemental 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.

GARY W. PANKOWSKI - PRESIDENT 1-29-05

FILED

954-236-9455