## 2005 FOR PROFIT CORPORATION

changed, or on an attachment w

SIGNATURE:

## Apr 11, 2005 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # L15103 1. Entity Name ANGELL CONTRACTING AND CONSTRUCTION, INC. Principal Place of Business \_\_\_ Mailing Address 4013 W CAYUGA ST 4013 W. CAYUGA ST TAMPA, FL 33614 US T TAMPA, FL 33614 A 122 CHES WHA ARM WHAT THE PER 02082005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0132764 A CONTRACTOR OF THE PARTY OF TH Not Applicable \$8.75 Additional 5. Certificate of Status Desired and address of the second second Fee Required 6. Name and Address of Current Registered Agent ANGELL, CHAD DO NOT WRITE 4013 W. CAYUGA ST. TAMPA, FL 33614 IN THIS SPACE 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 reinstaling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE ANGELL, CHAD NAME 4013 W. CAYUGA ST. STREET ADDRESS CJTY-ST-ZIP TAMPA, FL TITLE - 000000297232 NAME 04/11/05-80020-010 150.00 STREET ADDRESS and the second section of the second of the second of CITY-ST-ZIP · 中国中国人工中国的国际企业中国工作。 TITLE NAME The second second STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-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 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

Date

Daytime Phone #

**FILED**