2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # L44085

1. Entity Name
R. HUBER CONSTRUCTION CO.

Principal Place of Business	Mailing Address
7206 EAST TROPICAL WAY	7206 EAST TROPICAL WAY
PLANTATION, FL 33317 US	PLANTATION, FL 33317 US

DO NOT WRITE IN THIS SPACE

01062005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-0170316	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HUBER, ROBERT G
7206 EAST TROPICAL WAY
PLANTATION, FL 33317

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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 reinstating)

04/14/05-80056-007 150.00

FILE NOW!!! FEE IS $150.00 **After May 1, 2005 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	HUBER, ROBERT G
STREET ADDRESS	7506 EAST TROPICAL WAY
CITY-ST-ZIP	PLANTATION, FL 33317

TITLE	P
NAME	HUBER, ROBERT G
STREET ADDRESS	7206 EAST TROPICAL WAY
CITY-ST-ZIP	PLANTATION, FL 33317

TITLE	ST
NAME	HUBER, DORIS M
STREET ADDRESS	7206 EAST TROPICAL WAY
CITY-ST-ZIP	PLANTATION, FL 33317

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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 changed, or on an attachment with an address, with all other like empowered.

DORIS M. HUBER

SIGNATURE: _____ ST 4-12-05 954-792-6727

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #