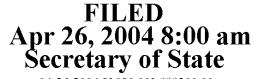
## ANNUAL REPORT **DOCUMENT # L64299** 1. Entity Name LIFESTYLES CONSTRUCTION, INC.



04-26-2004 91090 001 \*\*\*300.00

	HM  RIEN ROAD  DE, FL 34052-  ace of Business  SWAGUGTUS	Mailing Address C/O SYLVIA OHM 2052 S.E. DARIEN ROAD PORT ST. LUCIE, FL 34952  Mailing Address Source as ## 2 Suite, Apt. #, etc.				01092004 Chg-P CR2E034 (10/03)				
Sity & State	St. Lucia Fo	City & State		_	4. FEI Numbe			<del>}</del>	plied For	
Zip	Country	Zip	itry		65-0181791  5. Certificate of Status Desired			Not Applicable		
349	6. Name and Address of Current R	edistered Agent		<u> </u>		, , , , , , , , , , , , , , , , , , ,	Address of Nev		Fee Require	
OHM, SYL 3052 S.E. I PORT ST.I		Name Street Address (P.O. Box Number is Not Acceptable)								
		City				FL	Zip Cod	e ·		
34984  8. The above named entity submits this statement for the purpose of changing its register.					gistere	d agent, or bo	th, in the State of		amiliar with,	and accept
the obligations of registered agent.										
SIGNATURE										
After-Ma	E NOWIII FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0		_		\$5.0 Added	O May Be to Fees				
10.	The second secon			E I		ADDITIONS,	CHANGES TO C	FFICERS AND	DIRECTOR  Change	S IN 11
NAME STREET ADDRESS CITY-ST-ZIP	OHM, SYLVIA 3 <del>052 S.E. DARIEN ROA</del> D PORT ST.LUCIE, FL	□ Delete		ME EET ADDRESS '-ST-ZIP	<b>.</b>				∏ Cumt⊕r	[] Abbillon
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, CHARLES F. JR. 3 <del>052 S.E. DARIEN RO</del> AD PORT ST.LUCIE, FL			LE ME MEET ADDRESS Y-ST-ZIP					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		nan Stri	TITLE NAME STREET ADDRESS CITY-ST-ZIP		-			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	- 1	_					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		1.					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete		1		,	` `		☐ Change	☐ Addition
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or frustee empo or on an attachment with an address, w	true and accurate and that r wered to execute this report	ny signa as requ	ature shall have	e the si	ame legal effe	ct as if made und	ier ceth; that I a	am an office	r or director