


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # L92441
 1. Entity Name
 FUTURISTIC CONSTRUCTION, INC.



Principal Place of Business 110 W. OAK ST ARCADIA, FL 34266 US	Mailing Address 110 W. OAK ST ARCADIA, FL 34266 US
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01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0210504	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 PAUL, TIMOTHY L
 10230 SW CR 769
 ARCADIA, FL 34266

DO NOT WRITE 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PAUL, TIMOTHY L 10230 SW CR 769 ARCADIA, FL 34266
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WATSON, JOHN O JR 10230 SW CR 769 ARCADIA, FL 34266
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PAUL AVA A 10230 SW CR 769 ARCADIA, FL 34266
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WATSON, GAYLE 10230 SW CR 769 ARCADIA, FL 34266
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 04/19/04-80042-004 150.00

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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.

SIGNATURE: 
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-04 863-993-1376
 Date Daytime Phone #