## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Apr 19, 2004 08:00 AM Secretary of State DOCUMENT #L93890 FRANK GONI CONSTRUCTION INC. Principal Place of Business Mailing Address 3581 S.W. 143RD AVENUE 3581 S.W. 143RD AVENUE MIRAMAR, FL 33027 MIRAMAR, FL 33027 US 03032004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0213146 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GONI, FRANK DO NOT WRITE 3581 SW 143 AVE MIRAMNR, FL 33027 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, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when roinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE U00000117002 04/19/04-80002-010 150.00 GONI, FRANK NAME STREET ADDRESS 3581 SW 143 AVE CITY-ST-ZIP MIRAMAR, FL 33027 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST- ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP mle NAME STREET ADDRESS CITY-ST-ZIP ₹ITT F NAME STREET ADDRESS 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 attactingent with an address, with all other like empowered.

ITED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #