

ANNUAL REPORT**FILED****Apr 15, 2005 08:00 AM
Secretary of State****DOCUMENT # L93890****1. Entity Name
FRANK GONI CONSTRUCTION INC.****Principal Place of Business
3581 S.W. 143RD AVENUE
MIRAMAR, FL 33027 US****Mailing Address
3581 S.W. 143RD AVENUE
MIRAMAR, FL 33027 US**

01182005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE**4. FEI Number**
65-0213146 **Applied For**
Not Applicable**5. Certificate of Status Desired** ☐ **\$8.75 Additional
Fee Required****6. Name and Address of Current Registered Agent****GONI, FRANK
3581 SW 143 AVE
MIRAMNR, FL 33027****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**

Signature: typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

3/18/05
DATE**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 GONI, FRANK
STREET ADDRESS 3581 SW 143 AVE
CITY - ST - ZIP MIRAMAR, FL 33027**TITLE**
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CITY - ST - ZIP000000308303
04/15/05-80088-014 150.00**DO NOT WRITE
IN THIS SPACE****12. I hereby certify that the information supplied with this form does not qualify for the exemption stated in Section 119.07(3)(f), 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

Date

Daytime Phone #

Frank Goni **3/18/05** **305-3224243**