2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State
04-11-2005 90190 032 ***150.00

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DOCUMENT # M38390

1. Entity Name
VINCE-ANDREW CONSTRUCTION COMPANY, INC.

Principal Place of Business	Mailing Address
1035 ~~N.E. 122 ST.~~	1035 ~~GRAND AVE~~
~~N. MIAMI~~, FL 33161	~~MIAMI~~, FL 33163

01252005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
1035 GRAND AVE.	1035 GRAND AVE.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORANGE CITY FL	City & State: ORANGE CITY FL.
Zip: 32763 Country: U.S.	Zip: 32763 Country: U.S.

4. FEI Number: 59-2751432 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SCHNETZER, VINCENT
1035 GRAND AVE
~~MIAMI, FL 33163~~

7. Name and Address of New Registered Agent

Name: SCHNETZER, VINCENT
Street Address (P.O. Box Number is Not Acceptable): 1035 GRAND AVE.
City: ORANGE CITY FL Zip Code: 32763

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] DATE 1-25-05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	PVD	☐ Delete
NAME	SCHNETZER, VINCENT	
STREET ADDRESS	1035 GRAND AVE	
CITY-ST-ZIP	ORANGE CITY, FL 32763	
TITLE	SD	☐ Delete
NAME	SCHNETZER, LISA	
STREET ADDRESS	1035 GRAND AVE	
CITY-ST-ZIP	ORANGE CITY, FL 32763	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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] 1-25-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #