2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# M64748

Entity Name: INCRETE OF TAMPA, INC.

Current Principal Place of Business:

1611 GUNN HWY
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

PO BOX 151103
TAMPA, FL 33684

New Mailing Address:

FEI Number: 59-2933497 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOLCOMB, VICTOR W.
315 SOUTH HYDE PARK AVENUE
TAMPA, FL 33606

Name and Address of New Registered Agent:

HOLCOMB, VICTOR W.
106 SOUTH TAMPANIA AVENUE
SUITE 200
TAMPA, FL 33609

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.

SIGNATURE: _____ 04/30/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LOWE, MICHAEL L.,
Address: 1611 GUNN HWY
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL L LOWE PD 04/30/2004
Electronic Signature of Signing Officer or Director — Date