2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M83052

1. Entity Name VOKAC CONSTRUCTION, INC.



FILED Apr 12, 2004 08:00 AM Secretary of State

Principal Place of Business

1719 KNIGHTS CT NAPLES, FL 34112 US Mailing Adoress

1719 KNIGHTS CT Naples, FL 34112



DO NOT WRITE IN THIS SPACE

01232004 No Chg-P CR2E034 (10/03)

4.	FEI Number		Applied For	
	65-0055487		Not Applicable	
5.	Certificate of Status Desired		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

SIESKY, JAMES H 1000 N TAMIAMI TR., N. STE 201 NAPLES, FL 39102

DO NOT WRITE IN THIS SPACE

NAPLES,	FL 39102		IN THIS SPACE					
8. The above the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept			
SIGNATURE.	Signature, typed of printed name of registered agent and fille	t applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	986696119864 85712794-58073-019 150,50			
10.	OFFICERS AND DIREC	CTORS			ing to differ a mineral high with the enterior of the			
TITLE NAME STREET ADDRESS CITY ST ZIP	VP VOKAC, ROBERTA 1719 KNIGHTS COURT NAPLES, FL 34112							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VOKAC, EDWIN F. 1719 KNIGHTS CT NAPLES, FL 34112							
TITLE NAME STREET ADDRESS CITY STEZIP		i		DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY ST. ZIP				IN	THIS SPACE			
TITLE NAME STREET ADDRESS CITY - ST - ZIP								
TITLE NAME STREET ADORESS CITY - ST - ZIP								

12. Thereby certify that the information supplied with this filling 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 attackment with an aggress, with all other like empowered.

SIGNATURE: KOULITA U

4/9/04 [239] 793-1555