


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 10, 2005 08:00 AM
Secretary of State

DOCUMENT # M95000000036
 1. Entity Name
BOH BROS. CONSTRUCTION CO., L.L.C.



Principal Place of Business _____ Mailing Address _____
730 SOUTH TONTI STREET POST OFFICE DRAWER 53266
NEW ORLEANS, LA 70119 NEW ORLEANS, LA 70153

DO NOT WRITE IN THIS SPACE



01032005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 72-0536353	Applied For Not Applicable
5. Certificate of Status Desired XX \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00
Due by May 1, 2005

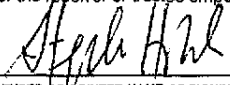
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOH, ROBERT S 730 SOUTH TONTI STREET NEW ORLEANS, LA 70119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOH, ROBERT H 730 SOUTH TONTI STREET NEW ORLEANS, LA 70119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STEWART, BINGHAM C 730 SOUTH TONTI STREET NEW ORLEANS, LA 70119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOEHM, EDWIN L JR 730 SOUTH TONTI STREET NEW ORLEANS, LA 70119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOH, STEPHEN H 730 SOUTH TONTI ST. NEW ORLEANS, LA 70119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/10/05-80090-002 55.00

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11. I hereby certify that the information supplied with this filing 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **Stephen H. Boh** **1/03/05** **(504) 821-2400**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #