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2003 U	FOR PROFIT ( NIFORM BUSINE		Apr 30	Apr 30, 2003 8:00 am			
DOCUMENT # P0000006322  1. Entity Name					Secretary of State 04-30-2003 90149 014 ***150.00		
GRAHA	AM CONSTRUCTION, INC.		W. T.				
	DO NOT WRITE	IN THIS	SPACE				
Principal Place of Business     3. Mailing Address							
17452 HWY 301 Suite, Apt. #, etc.		P.O. BOX 296 Suite, Apt. #, etc.		DO NOT W	DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number		Applied For	
Zip	CITY, FLORIDA Country	DADE CITY	, FLORIDA Country	31-1687793		Not Applicable  3.75 Additional	
33523	· -	33526	US	5. Certificate of Status Desired		e Required	
			Na	7. Name and Address of Curre	nt Registered A	gent	
	DO NOT W	DITE	A continue a f. Lee	Name GRAHAM, PHILLIP V.			
THE PROPERTY OF THE PARTY OF TH	DO NOT-W		Street Add	ress (P.O. Box Number is Not Acceptal	ole)		
98 y .	IN THIS SP	ACE		17452 HWY. 301			
			City	DADE CITY	FL	Zip Code 33523	
8. The above	named entity submits this statement fo	r the purpose of changi					
	ions of registered agent.		5 5	· -			
SIGNATURE .							
	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Registered Agent signature r	equired when reinstating)	DATE		
	nuary 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Payable to Florida Department of	State		9. Election Campaign Frust Fund Contribut		<b>\$5.00</b> May Be Added to Fees	
10.	OFFICERS AND	a consequence of the consequence			<b>李宝宝要看证</b> 。		
TITLE	D/S/T		TIFLE		ATAMAN SUL		
NAME STREET ADDRESS	KENNETH GRAHAM 5372 CYRIL DR.		NAME STREET ADDRESS	The Carried State of the Control of	ing the second s	A Transfill Land Sungarion	
CITY-ST-ZIP	DADE CITY, FL 3352	3	CITY-ST-ZIP	The state of the s	1 A		
TITLE	D/P		JULE			and the second second	
NAME	GRAHAM, PHILLIP V.		NAME		<b>新新教育的</b>		
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TITLE NAME	D/V/P		TITLE				
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CITY-ST-ZIP	DADE CITY, FL 3352	:3	CITY-ST-ZIP	DO NOT	VVKII		
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NAME			NAME		יטרוט		
STREET ADDRESS CITY-#1-ZIP			STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·	1. 1 機能を開始機能をよった。 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
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STREET ADDRESS			STREET ADDRESS		属的有法的		
CITY-ST-ZIP		- A-A-A	CITY-ST-ZIP				
TITLE			THE THE STATE OF		植物 基础 计实验点		

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 on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

PHILLIP V. GRAHAM

04-28-03

Daytime Phone #

FILED

CR2E034B (12/02)