
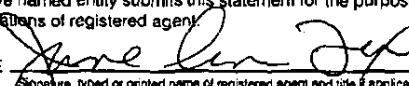


FILED  
May 23, 2003 8:00 am  
Secretary of State

04-28-2003 91875 001 \*\*\*661.25

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

<b>DOCUMENT # P01000003447</b>			
1. Entity Name <b>GREEN MACHINE CONSTRUCTION CORP.</b>			
Principal Place of Business <b>200 MACFARLANE DRIVE #405 DELRAY BEACH FL 33483</b>		Mailing Address <b>200 MACFARLANE DRIVE #405 DELRAY BEACH FL 33483</b>	
2. Principal Place of Business <b>118 QUEEN ELIZABETH COURT</b>		3. Mailing Address <b>← SAME</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>NO HUTCHINSON IS. FL</b>		City & State	
Zip <b>34949</b>	Country <b>ST. LUCIE</b>	Zip	Country
4. FEI Number <b>02-0609291</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>FOX, JUNE ANN 200 MACFARLANE DRIVE #405 DELRAY BEACH FL 33483</b>		7. Name and Address of New Registered Agent Name <b>JUNE-ANN FOX</b> Street Address (P.O. Box Number is Not Acceptable) <b>118 QUEEN ELIZABETH COURT</b> City <b>NO HUTCHINSON IS.</b> FL Zip Code <b>34949</b>	
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  DATE <b>5/20/03</b> (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D FOX, JUNE 200 MACFARLANE DR #405 DELRAY BEACH FL 33483</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D JUNE-ANN FOX 118 QUEEN ELIZABETH COURT NO. HUTCHINSON IS. FL 34949</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: 		Date <b>5/20/03</b> Daytime Phone # <b>772-595-6069</b>	