

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000031410

FILED  
Apr 21, 2004  
Secretary of State

Entity Name: SOLUTIONS CONSTRUCTION INC.

## Current Principal Place of Business:

6029 WILLIAMSBURG WAY  
TAMPA, FL 33625

## New Principal Place of Business:

2105 CROOKED CREEK WAY  
VALRICO, FL 33594

## Current Mailing Address:

6029 WILLIAMSBURG WAY  
TAMPA, FL 33625

## New Mailing Address:

2105 CROOKED CREEK WAY  
VALRICO, FL 33594

FEI Number: 59-3722950

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DONOVAN, MICHAEL J  
6029 WILLIAMSBURG WAY  
TAMPA, FL 33625

## Name and Address of New Registered Agent:

DONOVAN, MICHAEL J  
2105 CROOKED CREEK WAY  
VALRICO, FL 33594

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:

04/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: DONOVAN, MICHAEL J  
Address: 6029 WILLIAMSBURG WAY  
City-St-Zip: TAMPA, FL 33625

Title: V ( ) Delete  
Name: DONOVAN, JOHN T JR  
Address: 140 LANDER RD  
City-St-Zip: LEE, MA 01238

Title: T ( ) Delete  
Name: DONOVAN, LISA K  
Address: 6029 WILLIAMSBURG WAY  
City-St-Zip: TAMPA, FL 33625

Title: S ( ) Delete  
Name: DONOVAN, REBECCA M  
Address: 140 LANDER RD  
City-St-Zip: LEE, MA 01238

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: DONOVAN, MICHAEL J  
Address: 2105 CROOKED CREEK WAY  
City-St-Zip: VALRICO, FL 33594

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

Title: T (X) Change ( ) Addition  
Name: DONOVAN, LISA K  
Address: 2105 CROOKED CREEK WAY  
City-St-Zip: VALRICO, FL 33594

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 J DONOVAN

P

04/21/2004

Electronic Signature of Signing Officer or Director

Date