2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000050197

City-St-Zip:

FT LAUDERDALE, FL 33308

Entity Name: MASTERS DESIGN & CONSTRUCTION, INC

FILED May 02, 2005 Secretary of State

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|--|-------------------------------------|---|--------------|---|---|--|
| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
| 957 NW 53RD ST FT LAUDERDALE, FL 33309 | | | | 4350 WEST SUNRISE BLVD. SUITE 118 PLANTATION, FL 33313 | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| 957 NW 53RD ST FT LAUDERDALE, FL 33309 | | | | 4350 WEST SUNRISE BLVD. SUITE 118 PLANTATION, FL 33313 | | |
| FEI Number: | : 65-1045840 | FEI Number Applied For () | FEI Nun | nber Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | |
| FILOSO, GINA 957 NW 53RD ST FT LAUDERDALE, FL 33309 US | | | | FILOSO, GINA 4350 WEST SUNRISE BLVD. SUITE 118 PLANTATION, FL 33313 US | | |
| | named entity e of Florida. | submits this statement for the p | purpose o | f changing its register | ed office or registered agent, or both, | |
| SIGNATURE: | | | | 05/02/2005 | | |
| Electronic Signature of Registered Agent | | | | Date | | |
| | | 93(2)(b), F.S., the corporation did nong Trust Fund Contribution (). | ot receive t | he prior notice. | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | FILOSO, GINA 3221 NE 38TH | | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | FILOSO, JOH 3221 NE 38TH | | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | D (FILOSO, GINA 3221 NE 38TH | | | Title: Name: Address: | () Change () Addition | |

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.

City-St-Zip:

SIGNATURE: GINA FILOSO PRES 05/02/2005