Jul 12 05 07:13p Cathy Scott

FILED
Aug 29, 2005 8:00 am
Secretary of State

08-29-2005 90145 049 ***550.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000062222

1. Entity Name
5 STAR PLASTERING, INC.

50063802

Principal Place of Business	Mailing Address:
2117 NOVA VILLAGE DR DAVIE, FL 33317	2117 NOVA VILLAGE DR DAVIE, FL 33317

06292005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1117112

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SCOTT, ERNEST M JR.
2117 NOVA VILLAGE DR
DAVIE, FL 33317

DO NOT WRITE IN THIS SPACE

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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

FILE NOW!!! FEE IS $550.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SCOTT, ERNEST M SR.
STREET ADDRESS	2117 NOVA VILLAGE DR
CITY-ST-ZIP	DAVIE, FL 33317
TITLE	VP
NAME	SCOTT, RUSSELL
STREET ADDRESS	1900 SW 100 AVE
CITY-ST-ZIP	MIRAMAR, FL 33025
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Russell Scott 9/15/05 954432-5454
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #