2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 18, 2005 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # P01000113501** 1. Entity Name V & M CONSTRUCTION GROUP INC. Principal Place of Business Mailing Address 14500 SW 71 LANE 14500 SW 71 LANE MIAMI, FL 33183 MIAMI, FL 33183 04152005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 01-0551865 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MOUSSA, VICTOR DO NOT WRITE 14500 SW 71 LANE MIAMI, FL 33183 ____ 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. 4-15.05 SIGNATURE tile if applicable (NOTE Registered Agent signature required when reinstating) U00000313551 04/18/05-80129-024 158.75 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 \Box After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. **PSTD** TITLE NAME MOUSSA, VICTOR STREET ADDRESS 14500 SW 71 LANE CITY-ST-ZIP MIAMI, FL 33183 TITLE NAME DANYOV, DENNIS STREET ADDRESS 7903 N.W. 68 TERRACE CITY-ST-ZIP TAMARAC, FL 33321 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

<u>4-15-05 (305)388-693</u>

FILED