2004 FOR PROFIT CORPORATION

Apr 26, 2004 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P02000026271 04-26-2004 90508 032 ***150.00 CASÁ INVESTMENT & CONSTRUCTION COMPANY, INC. Principal Place of Business Mailing Address 54040169 7830 WILES RD. 7830 WILES RD. CORAL SPRINGS, FL 33067 CORAL SPRINGS, FL 33067 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. 04142004 CR2E034 (10/03) Cha-P City & State City & State 4. FEI Number Applied For 20-0318340 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name POLLOW, ASHLEY R Street Address (P.O. Box Number is Not Acceptable) 1515 N. FEDERAL HWY., STE. 300 BOCA RATON, FL 33432 Zip Code FL 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. D Change TITLE ☐ Delete TIT1 F ☐ Addition FRED WEISS NAME WEISS, FRED NAME 9882 AGNELLO ST. STREET ADDRESS 6570 N.W. 74TH DR. STREET ADDRESS LAKE WORTH, FL 33 467-6155 PARKLAND, FL 33067 CITY-ST-7IP CITY-ST-7IP ☐ Delete TITLE ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change Addition

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.

CITY-ST-7IP

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Weiss

4-2004

Daytime Phone #

FILED