## 2005 EOD DOCET CODDODATION

SIGNATURE:

RIGHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **FILED AM**

ANNUAL REPORT					Apr 11, 2005 08:00	
1. Entity Nan	ne	02000060	729		Apr 11, 2005 08:00 Secretary of State	
NEUHAL	JS CONSTRU	CTION INC.				
Principal Plac	ce of Business		Mailing Address	<del></del>	j	
4271 SW 54 DAVIE, FL 3	1TH AVE 33314-3826		4271 SW 54TH AVE DAVIE, FL 33314-3826	-		
<u></u>					04062005 No Chg-P CR2E034 (10/03)	
DO NOT WRITE IN THIS SPA				CE	4. FEI Number Applied For 04-3676904 Not Applied be	
					5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and A	ddress of Current R	egistered Agent			
NEUHAUS, DOUG 4271 SW 54TH AVE DAVIE, FL 33314-3826					DO NOT WRITE IN THIS SPACE	
O The share		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1		
the obligat	tions of registered a	gent.	ne purpose or changing its registe	rea omce or register	ed agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE.		name of registered agent and	tille if applicable. (NOTE Register	ed Agent signature required	when reinstating) DATE	
	E NOW!!! FEE ay 1, 2005 Fee	IS \$150.00 will be \$550.00	Election Campaign Final     Trust Fund Contribution		.00 May Be ed to Fees	
10.		OFFICERS AND D	RECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NEUHAUS, DOUG ESS 4271 SW 54TH AVENUE DAVIE, FL 33314					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000297183 04/11/05-80017-017 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				·	DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		0				
12. I hereby of indicated of the corrections of the	certify that the inform on this report or sup poration or the recei or on an attachmen	nation supplied with the priemental report is truyer or trustee empow twin an address, with	Is filling does not quality for the ex- ue and accurate and that my signal fred to execute this report as requ n all alloy like empowered.	emption stated in Section stated in Section state of the	ction 119.07(3)(f), Florida Statutes, I further certify that the information name legal effect as if made under oath; that I am an officer or director, Florida Statutes, and that my name appears in Block 10 or Block 11 if	