
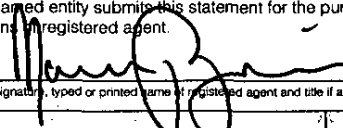
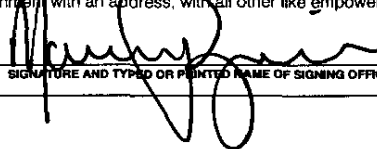


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2004 8:00 am
Secretary of State

03-31-2004 90005 023 ***150.00

DOCUMENT # P02000089000 1. Entity Name REECE BUILDERS, INC.																					
Principal Place of Business 16590 NE 26TH AVE 401 NORTH MIAMI BEACH, FL 33160			Mailing Address 16590 NE 26TH AVE 401 NORTH MIAMI BEACH, FL 33160																		
2. Principal Place of Business 3464 NE 167th ST Suite, Apt. #, etc.		3. Mailing Address 3464 NE 167th ST Suite, Apt. #, etc.																			
City & State NORTH MIAMI BEACH FL		City & State NORTH MIAMI BEACH FL		4. FEI Number 22-3387060																	
Zip 33160		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																	
6. Name and Address of Current Registered Agent PIERGROSSI, MAURICE L 16590 NE 26TH AVE 401 NORTH MIAMI BEACH, FL 33160			7. Name and Address of New Registered Agent Name PIERGROSSI MAURICE L Street Address (P.O. Box Number is Not Acceptable) 3464 NE 167th ST City N. MIAMI BEACH FL Zip Code 33160																		
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 a registered agent. SIGNATURE  MAURICE PIERGROSSI DATE 2/1/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees																		
10. OFFICERS AND DIRECTORS																					
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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:  MAURICE PIERGROSSI DATE 2/1/04 DAYTIME PHONE # 305-725-8802 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																					