## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Mar 31, 2006 08:00 AM Secretary of State DOCUMENT # P02000116101 MICHAEL STOWE CONSTRUCTION, INC Principal Place of Business Malling Address 1522 48TH AVE W 1522 48TH AVE W PALMETTO, FL 34221 PALMETTO, FL 34221 03092006 No Chg-F CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 32-0038046 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STOWE, MICHAEL DO NOT WRITE 1522 48TH AVE W PALMETTO, FL 34221 IN THIS SPACE 3. 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, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. าณะ PVST NAME STOWE, MICHAEL STREET ADDRESS 1522 48TH AVE W C574 - S5 - Z59 PALMETTO, FL 34221 U00000486812 04/13/06-80052-021 150.00 TITLE NAME STREET ADDRESS CSTY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CATY-ST-ZSP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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 path; that I am an officer or disector 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 charged, or on an attachness with an address, withput other like empowered.

TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**