# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

#### **DOCUMENT # P02000120433**

1. Entity Name

T.Y. LIN INTERNATIONAL CONSTRUCTION SERVICES, INC.



Principal Place of Business

825 BATTERY STREET SAN FRANCISCO, CA 94111 Mailing Address

825 BATTERY STREET SAN FRANCISCO, CA 94111

## FILED Feb 02, 2004 8:00 am Secretary of State

02-02-2004 90030 043 \*\*\*158.75

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01162004 No

No Chg-P

CR2E034 (10/03)

4. FEI Number 38-3669334

Applied For Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GILBERT, DAVID 10500 UNIVERSITY CENTER DRIVE SUITE 155 TAMPA, FL 33612

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	tions of registered agent.	ing the registered white or registered agent, or be	,	Tannanna wan, are gee	Cpt
SIGNATURE	. Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	ľ	DATE	
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#### FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00

**9.** Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS TITLE AS BAGBY, ALLISON K NAME STREET ADDRESS 825 BATTERY STREET CITY-ST-ZIP SAN FRANCISCO, CA 94111 NAME HAUSSMANN, JOHN G STREET ADDRESS 825 BATTERY STREET SAN FRANCISCO, CA 94111 PETERSON, ROBERT A NAME STREET ADDRESS 825 BATTERY STREET CITY-ST-ZIP SAN FRANCISCO, CA 94111 TITLE GILBERT, DAVID 10500 UNIVEWRSITY CENTER DRIVE, SUITE 155 STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33612 -TITLE ----NAME STREET ADDRESS CITY-ST-ZIP NAME LI -! STREET ADDRESS CITY-ST-ZIP

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IN THIS SPACE

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 OF PRINTED NAME OF SI

Allieun K. Backby

120104

418-196-814

Daytime Phone #