


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 11, 2005 8:00 am
Secretary of State

08-11-2005 90001 023 ***558.75

DOCUMENT # P02000125652			
1. Entity Name M JORDAN CONSTRUCTING, INC.			
Principal Place of Business 7606 ALVINA ST. TAMPA FL 33625		Mailing Address 7606 ALVINA ST. TAMPA FL 33625	
2. Principal Place of Business 7546 Boyette Rd.		3. Mailing Address 7546 Boyette Rd.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Zephyrhills FL.		City & State Zephyrhills FL.	
Zip 33544	Country Pasco	Zip 33544	Country Pasco.
4. FEI Number 13-4221717		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent JORDAN, MICHAEL A 1606 ALVINA ST. TAMPA FL 33625		7. Name and Address of New Registered Agent Name Michael and Bregina JORDAN Street Address (P.O. Box Number is Not Acceptable) 7546 Boyette Rd. City Zephyrhills FL Zip Code 33544	
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 <i>[Signature]</i> Michael Jordan <i>[Signature]</i> Bregina Jordan 8-1-05 <small>Signature of agent or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$550.00 DUE BY September 7, 2005 Make Check Payable to Florida Department of State		S 607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. <input type="checkbox"/>	
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JORDAN, MICHAEL A 7606 ALVINA ST. TAMPA FL 33625 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President (P) BREGINA JORDAN, (Darlene) 7546 Boyette Rd Zephyrhills FL 33544 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President (P) Michael Jordan, Anthony 7546 Boyette Rd. Zephyrhills, FL 33544 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: *[Signature]* **8-1-05** **813 309-3386**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #