2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 04, 2004 8:00 am Secretary of State

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DOCUMENT # P03000017459						Secretary of State			
1. Entity Name . . NEW HORIZO!	N BUILDERS INC.								
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	- <u>k</u> -		i taya da sa	CO WE THE					
Principal Place of Bus		Mailing Address	NC.		. ,				
16214 DEW DROP LANE		16214 DEW DROP LA Tampa, Fl 33625	INE					•	
							5 1 21 41211 1224 2122 2122 21		
2. Principal Place of I	3. Mailing Address								
		J. Manning . Madrida				OBION LIIK BOIH OOLIF TOIK T	BARA IKDIL KODII DIDDI DHIID II		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		03012004	Chg-P	CR2E034 (10/03)		
City & State		City & State		4. FEI Numbe	er .		oplied For		
					37-	145 8371	 	ot Applicable	
Zip	Country	Zip	Coun	ntry	5. Certificate	of Status Desired	\$8.75 Add		
6. N	lame and Address of Curr	ent Registered Agent			7. Name and	Address of New Reg	Fee Require	:a	
				Name					
HOUT, DAVID L JR 16214 DEW DROP LANE				Street Address (P.O. Box Number is Not Acceptable)					
TAMPA, FL 33625									
				City			FL Zip Coo	le	
		nt for the purpose of changing i	ts register	ed office or regis	tered agent, or bo	th, in the State of Flori	da. I am familiar with	and accept	
the obligations of r	egistered agent.							. !	
SIGNATURE Signature	typed or printed name of registered a	gent and title if applicable. (NC	TE: Registere	ed Agent signature requ	ired when reinstating)		DATE		
يقوي د از العدد		Av 14 7 398							
FILE NO	Mill FEE IS \$150.00 2004 Fee will be \$55	9. Election Camp	aign Finar	ncing \$	5.00 May Be dded to Fees				
				e.					
10. · · · · OFFICERS AND DIRECTORS TITLE			11. TITL	<u></u>	·· • ·	CHANGES TO OFFIC	ERS AND DIRECTOR Change		
NAME		L Deicte	NAM	E 1	esident avid L.	Hout 3		Addition	
STREET ADDRESS				EET ADDRESS	214 Deus		ie Tampa i	G 336	
CITY-ST-ZIP				/-ST-ZIP		Stop Lun	☐ Change	☐ Addition	
TITLE NAME		☐ Delete	TITL NAM	1		•	E Change	TT YOURDS	
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP				r-ST-ZiP		-			
TITLE NAME		□ Delete	⊒ : TITL NAM		and the second s	ميد عومد محد	, Change	Addition	
STREET ADDRESS				EET ADDRESS			•		
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NAME STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP			СП	Y-ST-ZIP					
TITLE		☐ Delete	THTL				☐ Change	Addition	
NAME STREET ADDRESS			NAN STR	AE EET ADDRESS					
CITY-ST-ZIP				Y-ST-ZIP					
TITLE		☐ Delete	TITL	.E			☐ Change	Addition `	
NAME			NAN						
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS Y-ST-ZIP				į	
	nat the information supplied	with this filing does not qualify			Section 119 07/3\	(i) Florida Statutes I f	urther certify that the	information	
indicated on this	report or supplemental rep n or the receiver or trusteed	with this filing does not qualify ort is true and accurate and tha empowered to execute this repo ess, with all other like empowers	t my signa	ature shall have the	ne same legal effections of the control of the cont	of as if made under oa	th; that I am an office appears in Block 10 c	r or director or Block 11 if	
changed, or on a	an attachment with an addre	ess, with all other like empowers	d.//	1	,		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
SIGNATURE	<u>.</u> 1	[A	// 		3-1-04	813-96	1-1916	
JIGIYATUNI	SIGNATURE AND TYPED	OR PRINTED LAME OF SIGNING OFFICE	ER OR DIREC	TOR		Date	Daytime Phone #		