2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000022249

Entity Name: STREAMLINE CONSTRUCTION SERVICES, INC.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

POST OFFICE BOX 11958 ST. PETERSBURG, FL 33733 US

Current Mailing Address: New Mailing Address:

C/O ERNEST L. MASCARA, P.A.

475 CENTRAL AVENUE, SUITE M-8
ST. PETERSBURG, FL 33733 US
ST. PETERSBURG, FL 33701 US

FEI Number: 06-1680048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MASCARA, ERNEST L
THE KRESS BUILDING, SUITE M-8
475 CENTRAL AVENUE
ST. PETERSBURG, FL 33701 US

MASCARA, ERNEST L
THE KRESS BUILDING, SUITE 202
475 CENTRAL AVENUE
ST. PETERSBURG, FL 33701 US

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.

SIGNATURE: ERNEST L. MASCARA 04/27/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS () Delete Title: PVST (X) Change () Addition

 Name:
 JOHNS, MARISA M
 Name:
 JOHNS, BRIAN T

 Address:
 POST OFFICE BOX 11958
 Address:
 POST OFFICE BOX 11958

 City-St-Zip:
 ST. PETERSBURG, FL 33733 US
 City-St-Zip:
 ST. PETERSBURG, FL 33733 US

Title: VPT (X) Delete Title: () Change () Addition

 Name:
 JOHNS, BRIAN T
 Name:

 Address:
 POST OFFICE BOX 11958
 Address:

 City-St-Zip:
 ST. PETERSBURG, FL 33733 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN T. JOHNS PVST 04/27/2005