2004 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 31, 2004 8:00 am Secretary of State **DOCUMENT # P03000059291** 03-31-2004 90006 005 ***150.00 CALOSSO CONSTRUCTION CO., INC. Principal Place of Business Mailing Address 37 YACHT CLUB DRIVE STE #110 37 YACHT CLUB DRIVE STE #110 **24UZ4546** NORTH PALM BEACH, FL 33410 NORTH PALM BEACH, FL 33410 2. Principal Place of Business 3. Mailing Address CALOSSO DR #110 Chg-P 02042004 CR2E034 (10/03) 250 4. FEI Number Applied For City & State 27-0064626 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired m Beach Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 City Zip Code 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 Signature, lyped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11 TITLE ☐ Defete TITLE ☐ Change ☐ Addition CALOSSO, PETER R NAME NAME 37 YACHT CLUB DRIVE STE #110 STREET ADDRESS STHEET ADDRESS NORTH PALM BEACH, FL 33410 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-20P Addition Defete TITLE Change | NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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 to 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. 10 anne

FILED