2004 FOR PROFIT CORPORATION ANNUAL REPORT

Sep 29, 2004 8:00 am Secretary of State 09-29-2004 90001 016 ***150 00 DOCUMENT # P03000070620 B & B CONSTRUCTION OF CENTRAL FLORIDA, INC. Principal Place of Business Mailing Address 54073589 1020 MADELINE AVE 1020 MADELINE AVE PORT ORANGE, FL 32129 PORT ORANGE, FL 32129 3. Mailing Address 2. Principal Place of Business P.O. BOX Suite, Apt. #, etc. 09132004 CR2E034 (10/03) City & State City & State 4, FEI Number Applied For Ormono 43-202032 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PATENAUDE, BRADFORD ~ Street Address (P.O. Box Number is Not Acceptable) 1020 MADELINE AVE PORT ORANGE, FL 32129 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete TITLE Change Addition TITLE PATENAUDE, BRADFORD NAME NAME STREET ADDRESS 1020 MADELINE AVE STREET ADDRESS CITY-ST-ZIP PORT ORANGE, FL 32129 CITY-ST-ZIP TITLE Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP - Delete TITLE ☐ Chauge Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ■ Addition TITLE ☐ Delete NAME NAME

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.

STREET ADDRESS

CHY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

FILED

Attachment 54073583

B & B CONSTRUCTION OF CENTRAL FLORIDA, INC P.O. BOX 5268 ORMOND BCH, FL 32175 (386) 334-2544

September 27, 2004

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Ref. Number: P03000070620

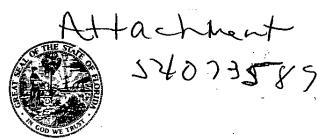
To Whom It May Concern:

This letter is to follow the conversation of September 13. 2004 that I had with Ruby Dunlap Document Specialist, requesting the form for filing the annual report, I explain to her that we did not receive the first one that I requested with the card that we receive.

Thank you

Bradford Patenaude

Officer/ Director



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 13, 2004

B & B CONSTRUCTION OF CENTRAL FLORIDA, INC. PO BOX 5268 ORMOND BEACH, FL 32175

SUBJECT: B & B CONSTRUCTION OF CENTRAL FLORIDA, INC. Ref. Number: P03000070620)

Pursuant to our telephone conversation of September 13, 2004, I am enclosing the form that you requested.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Ruby Dunlap Document Specialist

Letter Number: 804A00054500