

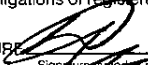
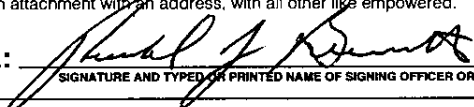


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90053 030 ***150.00

DOCUMENT # P03000096812						
1. Entity Name R.J. BENNETT CONSTRUCTION, INC.						
Principal Place of Business 213 MOONLIGHT BAY DR. PANAMA CITY BCH, FL 33054			Mailing Address 213 MOONLIGHT BAY DR. PANAMA CITY BCH, FL 33054			
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State				
Zip	Country	Zip	Country	01062004	Chg-P	CR2E034 (10/03)
4. FEI Number 11-3704583				Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
INGRAHAM, DANNY R 3898 NW 167TH ST., SUITE 105 MIAMI, FL 33054				Name		
				Street Address (P.O. Box Number is Not Acceptable) 1000 PONCE DE LEON BLVD SUITE 307		
				City CORAL GABLES		
				FL		
				Zip Code 33134		
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 		DANNY R. INGRAHAM, ESQ		DATE 2/20/04		
Signature of registered agent and title, if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		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	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	BENNETT, RONALD J		NAME			
STREET ADDRESS	213 MOONLIGHT BAY DR.		STREET ADDRESS			
CITY-ST-ZIP	PANAMA CITY BCH, FL 33054		CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	SHORES, RANDALL		NAME			
STREET ADDRESS	213 MOONLIGHT BAY DR.		STREET ADDRESS			
CITY-ST-ZIP	PANAMA CITY BCH, FL 33054		CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
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NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
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: 		RONALD J. BENNETT		PRESIDENT 02/20/04		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #		