

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000108082

FILED  
Feb 19, 2004  
Secretary of State

**Entity Name:** ALL-DRY FLOOD, FIRE, MILDEW RESTORATION & CONSTRUCTION, INC.

**Current Principal Place of Business:**

480 S. ANDREWS AVENUE, SUITE 101  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

3502 N POWERLINE ROAD, 543  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

480 S. ANDREWS AVENUE, SUITE 101  
POMPANO BEACH, FL 33069

**New Mailing Address:**

3502 N POWERLINE ROAD, 543  
POMPANO BEACH, FL 33069

FEI Number: 01-0799177

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORAN, LEE  
480 S. ANDREWS AVENUE, SUITE 101  
POMPANO BEACH, FL 33069

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

MORAN, LEE  
3502 N POWERLINE ROAD, 543  
POMPANO BEACH, FL 33069

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: LEE MORAN

02/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MORAN, LEE  
Address: 1969 SW 17TH STREET  
City-St-Zip: BOCA RATON, FL 33486

Title: D ( ) Delete  
Name: ZEVULONI, JOSEPH  
Address: 9521 NW 9TH COURT  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: LEE MORAN

D

02/19/2004

Electronic Signature of Signing Officer or Director

Date