2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000116115

Entity Name: AMERICAN CONSTRUCTION EXPERTS, INC.

FILED May 18, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 630 DRUID HILLS RD 3502 HENDERSON BLVD. TEMPLE TERRACE, FL 33617 SUITE #300 US TAMPA, FL 33609 **Current Mailing Address:** New Mailing Address: 3502 HENDERSON BLVD. 630 DRUID HILLS RD TEMPLE TERRACE, FL 33617 US #300 TAMPA, FL 33609 US FEI Number: 20-0313738 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: DOLLAR, ROBERT T PULS, JOHN L 630 DRUID HILLS RD 3502 HENDERSON BLVD. TEMPLE TERRACE, FL 33617 US #300 TAMPA, FL 33609 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: JOHN L. PULS 05/18/2004 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition DOLLAR, ROBERT T Name: Name: PULS, JOHN L 630 DRUID HILLS RD 3502 HENDERSON BLVD., SUITE #300 Address: Address: City-St-Zip: TEMPLE TERRACE, FL 33617 US City-St-Zip: TAMPA, FL 33609 US () Delete Title: VΡ () Change (X) Addition Title: Name: Name: PULS, BRANDIE L 3502 HENDERSON BLVD., SUITE #300 Address: Address: TAMPA, FL 33609 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition DOLLAR, ROBERT T Name: Name: 630 DRUID HILLS RD Address Address: City-St-Zip: City-St-Zip: TEMPLE TERRACE, FL 33617 US Title: () Delete Title: () Change (X) Addition DUCHAINE, EDWARD Name: Name: Address: Address: 4940 UMBER WAY NORTH City-St-Zip: City-St-Zip: **TAMPA, FL 33624**

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: JOHN L. PULS D 05/18/2004