2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000120010

Entity Name: ALL COAST CONSTRUCTION INC.

FILED Jul 14, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2581 S.W. GROTTO CIRCLE 2041 SW FEARS AVENUE PORT ST. LUCIE, FL 34953 PORT ST. LUCIE, FL 34953

Current Mailing Address: New Mailing Address:

2581 S.W. GROTTO CIRCLE 2041 SW FEARS AVENUE PORT ST. LUCIE, FL 34953 PORT ST. LUCIE, FL 34953

FEI Number: 05-0588833 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MASCETTA, JENNIFER
2581 S.W. GROTTO CIRCLE
PORT ST. LUCIE, FL 34953 US

MASCETTA, JENNIFER
2041 SW FEARS AVENUE
PORT ST. LUCIE, FL 34953 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: 07/14/2004

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: PD () Delete Title: PD (X) Change () Addition
Name: MASCETTA, JOHN Name: MASCETTA, JOHN
Address: 2581 S.W. GROTTO CIRCLE Address: 2041 S.W. FEARS AVENUE

 Address:
 2581 S.W. GROTTO CIRCLE
 Address:
 2041 SW FEARS AVENUE

 City-St-Zip:
 PORT ST. LUCIE, FL 34953
 City-St-Zip:
 PORT ST. LUCIE, FL 34953

Title: VD () Delete Title: VD (X) Change () Addition
Name: MASCETTA JENNIFER Name: MASCETTA JENNIFER

 Name:
 MASCETTA, JENNIFER
 Name:
 MASCETTA, JENNIFER

 Address:
 2581 S.W. GROTTO CIRCLE
 Address:
 2041 SW FEARS AVENUE

 City-St-Zip:
 PORT ST. LUCIE, FL 34953
 City-St-Zip:
 PORT ST. LUCIE, FL 34953

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: JENNIFER MASCETTA VP 07/14/2004