



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90571 028 ***150.00

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|---|--|---|---|--|--|
| DOCUMENT # P03000123896 1. Entity Name SOUSA LANDSCAPING & EXCAVATION, INC. | | | |  | |
| Principal Place of Business 33 EAGLE HARBOR TRAIL PALM COAST, FL 32164 | | | Mailing Address 33 EAGLE HARBOR TRAIL PALM COAST, FL 32164 | | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | 3. Mailing Address Suite, Apt. #, etc. | |  04262005 Chg-P CR2E034 (10/03) | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | | |
| 4. FEI Number 52-2420519 | | | | <input type="checkbox"/> 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 KNIGHT, JERRY C 2825 NORTH OCEANSHORE BLVD. BEVERLY BEACH, FL 32136 | | | 7. Name and Address of New Registered Agent Name KNIGHT, JERRY C. Street Address (P.O. Box Number is Not Acceptable) 4721 E. Moody Blvd., STE 505 & 506 City BUNNELL FL Zip Code 32110 | | |
| 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 <u><i>Jerry C. Knight</i></u> JERRY C. KNIGHT 04-26-05 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when consulting)</small> <small>DATE</small> | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 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 NAME STREET ADDRESS CITY - ST - ZIP | PST SOUSA, FRANCISCO 33 EAGLE HARBOR TRAIL PALM COAST, FL 32164 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | V SOUSA, THIAGO P 33 EAGLE HARBOR TRAIL PALM COAST, FL 32164 | <input checked="" type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Delete | | | |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Delete | | | |
| 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: <u><i>Francisco Sousa</i></u> FRANCISCO SOUSA 04-26-05 386 931-7500 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <small>DATE</small> <small>DAYTIME PHONE #</small> | | | | | |