2007 FOR PROFIT CORPORATION ANNUAL REPORT

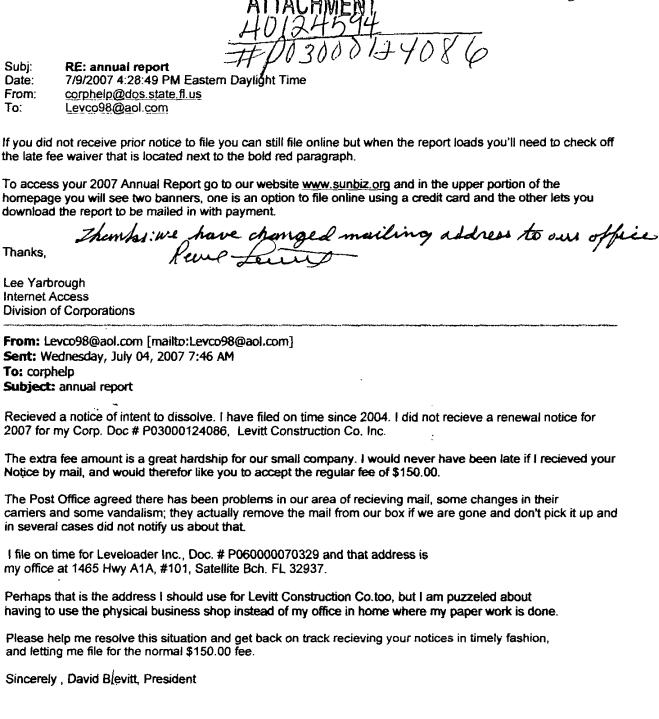
Secretary of State **DOCUMENT # P03000124086** 07-12-2007 90056 007 ***150.00 LEVITT CONSTRUCTION CO. INC. Principal Place of Business Mailing Address 132 TOMAHAWK DR., STE, D-1 132 TOMAHAMIX BR., STE. D-1 INDIAN HARBOUR BEACH, FL 32937 INDIAN HARBOUR BEACH, FL 32937 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 1465 HWY A 1A Suite, Apt. #, etc. Suite, Apt. #, etc. 07092007 CR2E034 (12/06) Chg-P 101 City & State City & State 4. FEI Number Applied For satellite beh 16-1687801 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **GUANDOLO, VICKIE** Street Address (P.O. Box Number is Not Acceptable) 114 BAYVIEW DR. INDIAN HARBOUR BEACH, FL 32937 City Zip Code 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. Signature, typed or printed name of registered agent and title it applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 14, 2007 Added to Fees corporation did not receive the prior notice ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE PST ☐ Delete MLE ☐ Change ☐ Addition LEVITT, DAVID NAME NAME 1465 HWY A1A, STE. 101 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SATELLITE BEACH, FL 32937 CITY-ST-ZIP TITLE Delete TILE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete MLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITLE Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-20P ☐ Delete TITLE ☐ Change ΠΠF ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

PST Quell 9 2007 321-779-0443

FILED

Jul 12, 2007 8:00 am



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Subi:

Date: From:

Thanks,

Lee Yarbrough Internet Access

To: corphelp

Division of Corporations

Subject: annual report

To:

RE: annual report

Levco98@aol.com