2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Jan 28, 2008 08:00 AN Secretary of State DOCUMENT # P03000124822 1. Entity Name FALCON CONSTRUCTION CORP. Principal Place of Business Mailing Address 5384 N SEMINOLE AVE 5384 N SEMINOLE AVE WINTER PARK FL 32972 WINTER PARK FL 32972 2. Principal Place of Business - No P.O. Box # 3. Malling Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State 4. FEI Number City & State Applied For 30-0227751 Not Applicable Zio Country \$8.75 Additional Country 5. Cartificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BRUTON, JAMES A Street Address (P.O. Box Number is Not Acceptable) 5384 N SEMINOLE AVE WINTER PARK FL 32972 City Zio Code 8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. Fan familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or primed Henrit of registered agent and title if amplicable (NOTE: Registered Agent a questure required when reportating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trus: Fund Contribution. 🐪 🔲 Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD TITLE Derete THILE Chauge Addition U000000801979 MAME BRUTON, JAMES A NAME 02/01/08-80041-003 150.00 STREET ADDRESS 5384 N SEMINOLE AVE STREET ADDRESS WINTER PARK FL 32972 CITY - ST- ZIP CITY-ST-7IP TITLE Defele Change Addition TITLE NAME MAME STREET ADDRESS STREET ADDRESS CITY-S1-7(P CITY-ST-ZIP THILE Defete Change Addition MAME STREET ADDRESS STREET ADDRESS OITY-S1-7IP CITY-CT-ZIP THILE Derete lithe ☐ Change Addition NAM: NAME STREET ADDRESS STREET ADDRESS CITY ST-219 CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition TITLE MAME HAME STREET ADDRESS STREET ADDRESS GITY-S1-7/2 CHY-ST-ZIP TITLE Detelo 🔲 THE ☐ Change Agditión MAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-702 CITY ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate anothat 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 ampowered 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

1-24-08

FILED