2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P03000127293 08-18-2004 90001 028 ***150.00 YAHOO CONSTRUCTION INC. Principal Place of Business Mailing Address **44000PS3** 5321 ASHMEADE ROAD 5321 ASHMEADE ROAD ORLANDO, FL 32810 ORLANDO, FL 32810 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 07282004 Chg-P 4. FEI Number Applied For City & State City & State 55-8850933 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCMAHON, DAVID V Street Address (P.O. Box Number is Not Acceptable) 5321 ASHMEADE ROAD ORLANDO, FL 32810 City FL 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 if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Due by September 8, 2004 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11: TITLE ☐ Delete TITLE ☐ Change ☐ Addition MCMAHON, DAVID NAME NAME STREET ADDRESS STREET ADDRESS 5321 ASHMEADE ROAD CITY - ST-ZIP ORLANDO, FL 32810 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Channe Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZJP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Change Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change, - 🔄 Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS Last Last

12. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

CITY-ST-7IP

FILED Aug 18, 2004 8:00 am Secretary of State