2004 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P03000128329

of the corporation or the rec

changed, or on an att

SIGNATURE:

trustee



FILED

Secretary of State

May 03, 2004 8:00 am

05-03-2004 90463 044 ***150.00 1. Entity Name STEALY CONSTRUCTION, INC. Principal Place of Business 14017357 Mailing Address 113 NORTH FEDERAL HWY. 113 NORTH FEDERAL HWY. DANIA BEACH, FL 33328 DANIA BEACH, FL 33328 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04262004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip 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 ADAMS, GERALD Street Address (P.O. Box Number is Not Acceptable) 113 NORTH FEDERAL HWY. DANIA BEACH, FL 33328 City 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 little it applicable. (NOTE: Registered Agent signature required when reinstating) DATE **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **PST** TITLE ☐ Delete TITLE Change Addition NAME STEALY, DIRK NAME STREET ADDRESS 10447 S.W. 53RD STREET STREET ADORESS CITY-ST-ZIP COOPER CITY, FL 33328 CITY-ST-ZIP VD ☐ Delete THUE TITLE Change Addition STEALY, DIRK NAME NAME STREET ADDRESS 10447 S.W. 53RD STREET STREET ADDRESS CITY-SI-ZIP COOPER CITY, FL 33328 CITY-ST-ZIP TITLE ☐ Delete TITLE ■ Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition TOTAL TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THLE Delete TITLE □ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-ZIP th this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if s, with all other like empowered. I hereby certify that the information s (bolied