2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Mar 01, 2004 8:00 am Secretary of State **DOCUMENT # P03000131301** 03-01-2004 90030 011 ***150.00 THE ENGINEERING AND CONSTRUCTION COMPANY, INC. Mailing Address Principal Place of Business 58141 MORTON STREET **58141 MORTON STREET** MARATHON, FL 33050 MARATHON, FL 33050 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 02182004 Cha-P 4. FEI Number 57-1192632 Applied For City & State City & State Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PACKER, KENNETH F Street Address (P.O. Box Number is Not Acceptable) **58141 MORTON STREET** MARATHON, FL 33050 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. ■ Addition ☐ Change ☐ Defete TITLE TITI F PACKER, KENNETH F NAME NAME STREET ADDRESS STREET ADDRESS **58141 MORTON STREET** CITY-ST-ZIP MARATHON, FL. 33050 CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TIBE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TIDE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 attachmen with an addless with the other like empowered. 305-743-0855

ING OFFICER OR DIRECTOR

FILED