2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000147108

1. Entity Name
BUILDING CONSULTANTS & CONTRACTORS, INC.

Principal Place of Business	Mailing Address
P O BOX 86032 ST PETERSBURG, FL 33738	P O BOX 86032 ST PETERSBURG, FL 33738

DO NOT WRITE IN THIS SPACE

04072005 No Chg-P CR2E084 (10/03)

4. FEI Number
20-0471752
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WHITE, RAY
1303 N MYRTLE AVE
CLEARWATER, FL 33755

DO NOT WRITE IN THIS SPACE

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: _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NUMBER FEE IS $150.00
After May 1, 2005 Fee will be $500.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

U00000327681
04/25/05-80048-008 150.00

10. OFFICERS AND DIRECTORS

TITLE	DPST
NAME	WHITE, RAY
STREET ADDRESS	P.O. BOX 86032
CITY-ST-ZIP	SAINT PETERSBURG, FL 33736
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 attachment with an address, with all other like empowered.

SIGNATURE: Ray White 04/07/05 727 642 7197
Signature and Typed or Printed Name of Individual Officer or Director — Date — Daytime Phone #