2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2004 8:00 am
Secretary of State
03-03-2004 90023 021 ***150.00

DOCUMENT # P04000002037

1. Entity Name
DOCK CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
2 HARGROVE GRADE, UNIT J PALM COAST, FL 32137	P O BOX 352918 PALM COAST, FL 32135

2. Principal Place of Business	3. Mailing Address
1 Enterprise Drive	
Suite, Apt. #, etc. Unit 5	Suite, Apt. #, etc.
City & State Bunnell, FL 32110	City & State
Zip / Country	Zip / Country

04000002037

03122004 Chg-P CR2E034 (10/03)

4. FEI Number
52-2437466
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SAVY, BENJAMIN 25 PINE CONE DR STE 2A PALM COAST, FL 32164	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ERIKSEN, KENNETH 98 HAWKS LN FLAGLER BEACH, FL 32136	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Moiseev, Vladimir 47 Fennwood Lane Palm Coast, FL 32137	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Simoes, Joel PO Box 352796 Palm Coast, FL 32135	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Melnic, Vladimir 111 Rickenbacker Dr. Palm Coast, FL 32164	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Kenneth Eriksen KENNETH ERIKSEN 3/15/04 386/445-7460
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #