## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 23, 2006 08:00 AM Secretary of State

1. Entity Name	MENT # P0400004009 old construction, inc.	2			secretary or state
Principal Place 3480 WILLIAM MALABAR, FL	IS AVE	lailing Address 3480 WILLIAMS AVE MALABAR, FL 32950 US		778811887 777	
DO NOT WRITE IN THIS SPACE				02152006  4. FEI Numbin 11-374  5. Certificate	
ARNOLD, I 3480 WILL MALABAR		stered Agent	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  Signature, typed or printed name of registered agent and site if applicable. (MOTE: Registered Agent appnishing required when reinstating)  DATE					
FILI After Ma	E NOWILL FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Fine Trust Fund Contribution		i.00 May Be ded to Fees	
10. THILE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRI P ARNOLD, DON R 3480 WILLIAMS AVE_ MALABAR, FL 32950	CTORS			
title Name Street address City-St-217					000000443623 03/06/06- <b>80</b> 01 <b>9-</b> 00/ 150.00
Title Hame Simeet Address City-St-Zip				DO	NOT WRITE
TITLE NAME SIRELY AUDRESS CITY-ST-ZIP				IN	THIS SPACE
name street address chy-st-lip					
TITLE NAME STREET ADDRESS CITY-ST-TIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental apport 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 of invalue 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 all address, with all directive empowered.  SIGNATURE:					