2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000138149

Entity Name: HAYES CONSTRUCTION, REMODEL & REPAIR, INC.

FILED Apr 14, 2005 Secretary of State

2834 NEW ENGLAND STREET 2439 LOMA LINDA ST.

SARASOTA, FL 34231 US SARASOTA, FL 34239 US

Current Mailing Address: New Mailing Address:

2834 NEW ENGLAND STREET 2439 LOMA LINDA ST.

SARASOTA, FL 34231 US SARASOTA, FL 34239 US

FEI Number: 20-1709882 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAYES, MICHAEL P
2834 NEW ENGLAND STREET
2439 LOMA LINDA ST.
SARASOTA, FL 34231 US
SARASOTA, FL 34239 US

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.

SIGNATURE: MICHAEL P. HAYES 04/14/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT () Delete Title: DPT (X) Change () Addition

 Name:
 HAYES, GINA L
 Name:
 HAYES, GINA L

 Address:
 2834 NEW ENGLAND STREET
 Address:
 2439 LOMA LINDA ST.

 City-St-Zip:
 SARASOTA, FL 34231 US
 City-St-Zip:
 SARASOTA, FL 34239 US

Title: DVPS () Delete Title: DVPS (X) Change () Addition

 Name:
 HAYES, MICHAEL P
 Name:
 HAYES, MICHAEL P

 Address:
 2834 NEW ENGLAND STREET
 Address:
 2439 LOMA LINDA ST.

 City-St-Zip:
 SARASOTA, FL 34231 US
 City-St-Zip:
 SARASOTA, FL 34239 US

Title: () Delete Title: AS () Change (X) Addition

 Name:
 Name:
 BOERAS, JASÓN

 Address:
 Address:
 2439 LOMA LINDA ST.

 City-St-Zip:
 City-St-Zip:
 SARASOTA, FL 34239 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GINA L. HAYES DP 04/14/2005