2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 20, 2005 8:00 am Secretary of State

01-20-2005 90039 007 ***150 00

DOCUMENT # P94000022816 1. Entity Name CONSTRUCTION CONNECTIONS UNLIMITED, INC.									01-20-2005	90039 0	U/ ***150.t	JO	
1699 LAS CASAS RD.				Mailing Address 1699 LAS CASAS RD. BOCA RATON, FL 33432							5000	4188	
2. Principal Place of Business 3. Mailing Address 303 JIM MORAN BLVD, STE. B 303 JIM MORAN B													
303 Jim Suite, Apt. s	<u>M</u> ⊘RF #, etc.	N BLVD	,STE.B	303 31m Mo Suite, Apt. #, etc.	ean Bi	vo.,S	TEB	01102005	Chg-P	CR2E	034 (10/03)		
DEERFI	City & State EERFIELD BEACH, FC			City & State DEERFIELD		65-0481520 Not App			Applicable				
3344:	2 BROWARD			Zip 33.44.2	33442 BR		5. Certificate of Status Desire		Fee Required				
6. Name and Address of Current Registered Agent Name								7. Name and Address of New Registered Agent					
HEINZ, NORBERT J. 1699 LAS CASAS ROAD BOCA RATON, FL 33432							Street Address (P.O. Box Number is Not Acceptable) 2700 NE 5/2T STREET, APT. 2//						
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 Notice of Provided agent and the if applicable. (1307E: Repairered Agent oppositive required when reinstating) DATE													
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing								.00 May Be		9 7112			
10.	Р	OFFIC	ERS AND D	DIRECTORS Delete	11.	-	P	ADDITIONS	CHANGES TO O	FFICERS AN	ID DIRECTORS	IN 11 ☐ Addition	
NAME STREET ADDRESS CHY-S1-ZIP	HEINZ, NORBERT J. 1699 LAS CASAS ROAD BOCA RATON, FL			NAN STR					lbale i		APT. 6	Z//	
NAME STREET ADDRESS CITY-S1-ZIP		DIANE K S CASAS RD ATON, FL 334	€. 96	Delete	E ET ADDRESS - ST - ZIP					☐ Change	☐ Addition		
THLE HAME STREET ADDRESS CITY-ST-ZIP	BOCARO			. Delete	TITLI NAM STRE	E		-			[] Change	Addition	
TITLE NAME STREET ADDRESS GITY-ST-ZIP				☐ Delete		_			- .	,	Change	Addition	
TITLE NAME SYREET ADDRESS CITY-ST-ZIP		-		☐ Delete							Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITL NAM . STRI	E			•		☐ Change	☐ Addition	
of the co	rporation or	the receiver or tr	ustee empo	this filing does not quali true and accurate and to wered to execute this re with all other like empower	eport as requ	emption sta iture shall i ired by Ch	ited in S nave the apter 60	ection 119.07(3 same legal effe 7, Florida Statut	(i), Florida Statute ot as if made und es; and that my n	es. I further of ler oath; that ame appears	ertify that the in I am an officer s in Block 10 or	oformation or director Block 11 if	

William Norbeat 5 Heins

18 Jan 05