2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P94000042286

1. Entity Name

BOCA CONSTRUCTION INC.

FILED Sep 03, 2004 08:00 AM Secretary of State

Principal Place of Business 1121 S. MILITARY TRAIL

SUITE 205 DEERFIELD BEACH, FL 33442 Mailing Address

1121 S. MILITARY TRAIL

SUITE 205

DEERFIELD BEACH, FL 33442



DO NOT WRITE II	i this s	SPACE
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08252004 No Cha-P CR2E034 (10/03)

4. FEI Number 65-0553109 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name and	Address of	Current F	legistered Agent

GENDRON, MARC 1121 S. MILITARY TRAIL SUITE 205 DEERFIELD BEACH, FL 33442

the obligations of registered agent.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

SIGNATURE Signature, typed or printed name of registered agent and title If applicable (NOTE Registered Agent signature required whelveenstating) DATE							
1	ILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	Election Campaign Finan Trust Fund Contribution.	sing	\$5.00 May Be Added to Fees	In accordance with s. 607,193(2)(b), F.S., the corporation did not receive the prior notice.		
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GENDRON, MARC 423 N.W. 44 TERRACE - SUITE 102 DEERFIELD BEACH, FL 33442				000000171590 09/03/04-80002-015 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GENDRON, CHRISTIAN 404 N.W. 44 TERRACE - SUITE 102 DEERFIELD BEACH, FL 33442						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN ·	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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.							

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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