2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 08:00 AM
Secretary of State

4-27-04 772-567-057 Date Despire Phone #

DOCUMENT # P95000058914 1. Entity Name K.L.D. CONSTRUCTION, INC.					Secretary of State			
2501 27TH SUITE F-1B	e of Business AVENUE H, FL 32960	Mailing Address 140 44TH TERR SW VERO BEACH, FL 32968						
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DO NOT WRITE IN THIS SPACE				01062004 4. FEI Numb		CR2E034 (10	Applied For	
					e of Status Desired		Not Applicable 5 Additional aquired	
	6. Name and Address of Current Re	gistered Agent	26. 57 55 30.55	33849; 3574973534 \$133.	A STATE OF THE STA	The second second second	San a san maria San tasa sa san maria	
DEPP, WILLIAM S 140 44TH TERR SW VERO BEACH, FL 32968					NOT W THIS SP	and the second s		
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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, typed or printed name of registered agent and site 4 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 Finan Trust Fund Contribution.				\$5.00 May Be Added to Fees	U000000 04/29/04-6	139155 30111-008	150.00	
10.	OFFICERS AND DIF	RECTORS			range and against the manage mages and against the ball mages and against the ball	and the second s	ander and a superior	
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NAME STREET ADDRESS CITY-ST-ZIP	STD DEPP, NANCY H 2501 27TH AVENUE, SUITE F-1B VERO BEACH, FL 32960							
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					(i) Florida Statutes 1			
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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								

MICHATURE AND TYPED OR PRINTED RAMPOF RIGHING OFFICER OR DIRECTOR

SIGNATURE: _