


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000086338		
1. Entity Name THE BUILDING DEPARTMENT, INC.		
Principal Place of Business 11860 W STATE ROAD 84 STE 1 FORT LAUDERDALE, FL 33325	Mailing Address 11860 W STATE ROAD 84 STE 1 FORT LAUDERDALE, FL 33325	



07062004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0620100	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	DO NOT WRITE IN THIS SPACE
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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 _____ DATE _____
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when resigning)

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$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 DIRECTORS		<p>U00000168376 07/26/04-80011-007 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD WRIGHT, DICKERSON 7895 CONVOY CT STE # 18 SAN DIEGO, CA 92111	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD PIEDELIEVRE, FRANK 17 BIS, PL DES REFLÈTS, LA DEFENSE 2 94000 COURBEVOIE, FRANCE,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RIFFE, ROBERT 11860 W. STATE ROAD 84 FORT LAUDERDALE, FL 33325	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TARDAN, FRANCOIS 17 BIS, PL DES REFLÈTS, LA DEFENSE 2 94000 COURBEVOIE, FRANCE,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HAIMES, BURTON K 875 THIRD AVENUE, #1433 NEW YORK, NY 10022	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FC DAMASCENO, LUIS C 11860 W. STATE ROAD 84, STE. 1 FORT LAUDERDALE, FL 33325	

12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other officers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Luis Damasceno, CPU 7/6/04 954-236-8400
Date Daytime Phone #