2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

Apr 13, 2006 8:00 am Secretary of State DOCUMENT # P96000010925 04-13-2006 90305 001 ***158.75 INTEGRITY BUILDING CONTRACTORS, INC. Principal Place of Business Mailing Address 123 DATE PALM DRIVE 123 DATE PALM DRIVE 50011950 US LAKE PARK, FL 33403 US LAKE PARK, FL 33403 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/05) Chg-P 01162006 City & State City & State 4. FEI Number Applied For 65-0634896 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PROVO, ANTHONY W Street Address (P.O. Box Number is Not Acceptable) 123 DATE PALM DRIVE LAKE PARK, FL 33403 Zip Code F 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTDM TITLE Delete TITLE ☐ Change ☐ Addition PROVO, ANTHONY W NAME NAME STREET ADDRESS 123 DATE PALM DRIVE STREET ADDRESS CITY-ST-ZIP LAKE PARK, FL 33403 CITY-ST-7P Delete ☐ Change Addition TOTLE TITLE NAME PROVO, YVONNE NAME STREET ADDRESS 123 DATE PALM DRIVE STREET ADDRESS CITY-ST-ZIP LAKE PARK, FL 33403 CITY-SI-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP THTLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-7IP CITY-ST-7IP TITLE ☐ Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY-ST-78P 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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.

4/10/06

FILED