2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Feb 04, 2004 8:00 am **DOCUMENT # P96000021747 Secretary of State** 02-04-2004 90042 045 ***150.00 BEK INTERIOR CONTRACTORS, INC. Principal Place of Business Mailing Address 3821 NW 58TH CT 3821 NW 58TH CT VIRGINIA GARDENS, FL 33166-5728 VIRGINIA GARDENS, FL 33166-5728 2. Principal Place of Business 3. Mailing Address 7138 MICHHAN Suite, Apt. #, etc. Suite, Apt. #, etc. 01222004 Chg-P CR2E034 (10/03) City & State 4. FEI Number Applied For 65-0661679 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DURR, WILLIAM R 3821 NW 58TH CT VIRGINIA GARDENS, FL 33166-5728 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE D Delete TITLE Addition DURL, WILLIAM R 7138 MICHIGAN ISLE RD DURR. WILLIAM R NAME NAME STREET ADDRESS 3821 NW 58TH CT STREET ADDRESS CITY-ST-ZIP VIRGINIA GARDENS, FL 331665728 CITY-ST-ZIP LAKE WORHI, EL TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Delete Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS $2 \epsilon_1 \epsilon_2 \epsilon_3 \epsilon_4 \Omega \epsilon'$ CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change TITLE ☐ Addition **网络尼亚研究**。 NAME I half tie Co. STREET ADDRESS 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 sport 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 trade 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.

FILED