

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000026054

FILED  
Apr 06, 2005  
Secretary of State

Entity Name: SHEZA GENERAL CONTRACTORS, INC.

## Current Principal Place of Business:

3075-2 LEON RD.  
JACKSONVILLE, FL 32246 US

## New Principal Place of Business:

6283 POWERS AVENUE  
JACKSONVILLE, FL 32217 US

## Current Mailing Address:

3075-2 LEON RD.  
JACKSONVILLE, FL 32246 US

## New Mailing Address:

6283 POWERS AVENUE  
JACKSONVILLE, FL 32217 US

FEI Number: 59-3430930

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEADOWS, JILL P  
237 E BETANY BRANCH WAY  
JACKSONVILLE, FL 32259 US

## Name and Address of New Registered Agent:

MEADOWS, JILL P  
237 E BETONY BRANCH WAY  
JACKSONVILLE, FL 32259 US

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.

SIGNATURE:

04/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEOT ( ) Delete  
Name: POAG, DONALD JR  
Address: 4028 COG HILL CT  
City-St-Zip: JACKSONVILLE, FL 32225

Title: PS ( ) Delete  
Name: MEADOWS, JILL  
Address: 237 E BETANY BRANCH WAY  
City-St-Zip: JACKSONVILLE, FL 32259

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PS (X) Change ( ) Addition  
Name: MEADOWS, JILL  
Address: 237 E BETONY BRANCH WAY  
City-St-Zip: JACKSONVILLE, FL 32259

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JILL P. MEADOWS

PS

04/06/2005

Electronic Signature of Signing Officer or Director

Date