## **2004 FOR PROFIT CORPORATION**

## **FILED ANNUAL REPORT** Apr 15, 2004 08:00 AM **DOCUMENT # P97000074471 Secretary of State** 1. Entity Name B.I.C. CONSTRUCTION, INC. Principal Place of Business Mailino Address 1485 NORTHEAST 25TH STREET 1485 NORTHEAST 25TH STREET POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064 CR2E034 (10/03) 02102004 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0776734 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent REPASS, EDGAR L JR DO NOT WRITE 1485 NORTHEAST 25TH STREET POMPANO BEACH, FL 33064 IN THIS SPACE 3. 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 d agent and title it applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME REPASS, EDGAR L JR STREET ADDRESS 1485 NORTHEAST 25TH STREET U00000114428 C37Y-ST-789 POMPANO BEACH, FL 33064 04/15/04-80049-013 150.00 TITLE REPASS, ROBERT L NAME STREET ADDRESS 1485 NORTHEAST 25TH STREET CITY-ST-ZIP POMPANO BEACH, FL 33064 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-71P TITLE IN THIS SPACE NAME STREET ADDRESS CHTY-\$1-ZIP TITLE NAME STREET ADDRESS CTTY-ST-ZIP TITLE NAME

12. Thereby certify that the information supplied with this filting 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 suppliemental 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 engrowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

LOSD TYPED OR PRINTED HAMP OF SIGNING OFFICER ON DIRECTOR

Davime Phone #