2007 FOR PROFIT CORPORATION ANNUAL REPORT

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

FILED DOCUMENT # P98000058992 07 MAR 20 PH 4: 29 WEST FLA. BUILDERS GROUP, INC. PECKETARY OF STATE VLLAHASSEE, FLORIDA Mailing Address Principal Place of Business 240 71ST AVE 240 71ST AVE ST. PETERSBURG BEACH, FL 33706 ST. PETERSBURG BEACH, FL 33706 02262007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FELNumber 59-3530995 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NIX, JOSEPH E PD DO NOT WRITE 240 71ST AVE ST. PETERSBURG, FL 33706 IN THIS SPACE 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. Fam 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 FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE PD NIX. JOSEPH E NAME STREET ADDRESS 240 71ST AVE CITY-ST-ZIP ST. PETERSBURG BEACH, FL 33706 TITLE NIX, SHARI T NAME STREET ADDRESS 240 71ST AVE ST. PETERSBURG, FL 33706 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP 000094771590 03/26/07--01038--001 **200.00 NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE PD JOSEPHENIX 2-25-07 727 6870555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Dayline Prove #

23/26