


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 30, 2004 8:00 am
Secretary of State

01-30-2004 90076 009 ***150.00

| | |
|--|---|
| DOCUMENT # P98000106043 |  |
| 1. Entity Name G&G CONSTRUCTORS INC. | |

| | |
|---|--|
| Principal Place of Business 81001 OVERSEAS HWY., SUITE A ISLAMORADA, FL 33036 | Mailing Address P.O. BOX 1759 ISLAMORADA, FL 33036 |
|---|--|

| | |
|---|---|
| 2. Principal Place of Business Suite, Apt. #, etc. | 3. Mailing Address Suite, Apt. #, etc. |
|---|---|

| | |
|--------------|--------------|
| City & State | City & State |
|--------------|--------------|

| | | | |
|-----|---------|-----|---------|
| Zip | Country | Zip | Country |
|-----|---------|-----|---------|

6. Name and Address of Current Registered Agent

GREGIS, RONALD L JR.
114 SIOUX ST.
TAVERNIER, FL 33070



01232004 Chg-P CR2E034 (10/03)

| | |
|------------------------------------|-------------------------------|
| 4. FEI Number 65-0886063 | Applied For Not Applicable |
|------------------------------------|-------------------------------|

| | |
|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|---------------------------------------|

7. Name and Address of New Registered Agent

| | | | | |
|------|--|------|-----------|----------|
| Name | Street Address (P.O. Box Number is Not Acceptable) | City | FL | Zip Code |
|------|--|------|-----------|----------|

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 _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

| | |
|--|------------------------------------|
| 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
|--|------------------------------------|

10. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|----------------------|----------------|---------------------|---------------------------------|
| P | GREGIS, RONALD L JR. | 114 SIOUX ST. | TAVERNIER, FL 33070 | <input type="checkbox"/> |
| S | GREGIS, AUDRA B | 114 SIOUX ST. | TAVERNIER, FL 33070 | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|-------|------------------|------------------------|---------------------|-------------------------------------|-----------------------------------|
| S | RONALD L. GREGIS | 145 INDIAN MOUND TRAIL | TAVERNIER, FL 33070 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

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 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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/04 (305) 664-9972
Date Daytime Phone #