2006 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P99000006436 02-06-2006 90067 041 ***158.75 MASTROSIMONE CONSTRUCTION, INC. Principal Place of Business Mailing Address BUUTHTAA 35338 PONDEROSA DRIVE 35338 PONDEROSA DRIVE FRUITLAND PARK, FL 34731 FRUITLAND PARK, FL 34731 2. Principal Place of Business 3. Mailing Address 3011 Lake Griffin Roa P.O. Box 685 Suite, Apt. #, etc. Suite, Apt. #, etc. 01242006 CR2E034 (11/05) Cha-P City & State Applied For 4. FEI Number City & State 59-3603774 Not Applicable adu Zip Country \$8.75 Additional 5. Certificate of Status Desired 7.-Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MASTROSIMONE, PHILIP JR Street Address (P.O. Box Number is Not Acceptable) 35338 PONDEROSA DRIVE FRUITLAND PARK, FL 34731 Griffin 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. Philip Mastrosimone Trustered agent and title if applicable. (NOTE: Registered Age President/Director SIGNATURE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FRE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PΠ TITLE ☐ Change ☐ Addition ☐ Defete TITLE MASTROSIMONE, PHILIP JR NAME NAME 3011 Lake Griffin Road 35338 PONDEROSA DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FRUITLAND PARK, FL 34731 CITY-ST-ZIP Lady Lake, FL 32159 Change TITLE □ Delete TITLE ■ Addition NAME MASTROSIMONE, ROSE NAME 3011 Lake Griffin Road STREET ADDRESS 35338 PONDEROSA DRIVE STREET ADDRESS CITY - ST - 7(P FRUITLAND PARK, FL 34731 CITY-ST-ZIP Lake, FL 32159 TITLE Change ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TOTLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental transfer 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 of trusted 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 a faddress, with all other like empowered.

Philip Mastrosimone Jr

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNI

FILED Feb 06, 2006 8:00 am