2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000008015

Entity Name: DEE BUILDERS OF SOUTH FLORIDA, INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

123 S.E. 4TH AVE.,APT.1 12576 SUNSET BLVD

HALLANDALE, FL 33009 ROYAL PALM BEACH, FL 33411

Current Mailing Address: New Mailing Address:

123 S.E. 4TH AVE.,APT.1 12576 SUNSET BLVD

HALLANDALE, FL 33009 ROYAL PALM BEACH, FL 33411

FEI Number: 65-0910546 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DESJARDINS, SHAWN L
123 S.E. 4TH AVE.,APT.1

DESJARDINS, SHAWN L
12576 SUNSET BLVD

HALLANDALE, FL 33009 US ROYAL PALM BEACH, FL 33411 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: 04/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 DESJARDINS, SHAWN L
 Name:
 DESJARDINS, SHAWN L

 Address:
 123 S.E. 4TH AVE.,APT.1
 Address:
 12576 SUNSET BLVD

City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: ROYAL PALM BEACH, FL 33411

 Title:
 VPS
 () Delete
 Title:
 VPS
 (X) Change () Addition

 Name:
 DESJARDINS, MICHELLE P
 Name:
 DESJARDINS, MICHELLE P

 Address:
 123 S.E. 4TH AVE.,APT.1
 Address:
 12576 SUNSET BLVD

 City-St-Zip:
 HALLANDALE, FL 33009
 City-St-Zip:
 ROYAL PALM BEACH, FL 33411

Title: TD () Delete Title: TD (X) Change () Addition

Name:DESJARDINS, MICHELLEName:DESJARDINS, MICHELLEAddress:123 S.E. 4TH AVE.,APT.1Address:12576 SUNSET BLVD

City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: ROYAL PALM BEACH, FL 33411

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: SHAWN DESJARDINS PD 04/28/2005