

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000074694

FILED
Apr 28, 2004
Secretary of State

Entity Name: REEF TROPICAL CONSTRUCTION, INC.

Current Principal Place of Business:

6 BARRACUDA LANE
KEY LARGO, FL 33037

New Principal Place of Business:

1A BARRACUDA LANE
KEY LARGO, FL 33037

Current Mailing Address:

6 BARRACUDA LANE
KEY LARGO, FL 33037

New Mailing Address:

1A BARRACUDA LANE
KEY LARGO, FL 33037

FEI Number: 65-0970471

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KERSHNER III, CLAUDE B
8368 SW 182ND TERR.
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KERSHNER, CLAUDE
Address: 6 BARRACUDA LANE
City-St-Zip: KEY LARGO, FL 33037

Title: VD () Delete
Name: POST, RUSSELL
Address: 6 BARRACUDA LANE
City-St-Zip: KEY LARGO, FL 33037

Title: ST () Delete
Name: KERSHNER, CLAUDE
Address: 6 BARRACUDA LANE
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KERSHNER, CLAUDE III
Address: 6 BARRACUDA LANE
City-St-Zip: KEY LARGO, FL 33037

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: KERSHNER, CLAUDE III
Address: 6 BARRACUDA LANE
City-St-Zip: KEY LARGO, FL 33037

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: CLAUDE B KERSHNER III

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04/28/2004

Electronic Signature of Signing Officer or Director

Date