2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 16, 2007 08:00 AM **DOCUMENT # P99000096569 Secretary of State** B.F.J. CONSTRUCTION, INC. Principal Place of Business Mailing Address 2956 BRIDLEWOOD DRIVE 2956 BRIDLEWOOD DRIVE PALM HARBOR, FL 34683 PALM HARBOR, FL 34683-2003 US No Chg-P CR2E034 (11/05) 02132007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3607648 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LANGONE, MICHAEL DO NOT WRITE 2956 BRIDLEWOOD DRIVE PALM HARBOR, FL 34683-2003 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. 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) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PRES TITLE LANGONE, MICHAEL STREET ADDRESS 2956 BRIDLEWOOD DR CITY-ST-ZIP PALM HARBOR, FL 346832003 TITLE NAME STREET ADDRESS U00000638247 02/27/07-80023-003 150.00 CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 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 receipter 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 offer like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP