2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

Apr 26, 2004 8:00 am Secretary of State **DOCUMENT # V16715** 1. Entity Name 04-26-2004 90580 027 ***150.00 GREEN RIVER CONSTRUCTION COMPANY Principal Place of Business Mailing Address 7800 RED RD 7800 RED RD SUITE 117 SOUTH MIAMI FL 33143 SUITE 117 SOUTH MIAMI FL 33143 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State 4. FEI Number Applied For 65-0322596 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent -= 7. Name and Address of New Registered Agent Name HERMAN, LEONARD Street Address (P.O. Box Number is Not Acceptable) **7800 RED RD SUITE 117** SOUTH MIAMI FL 33143 City Zip Code 8. The above named a Submits this statement or the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accept the obligations of ered/ágent SIGNATURE (NOTE, Registered Agent signature required when reinstating) NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME HERMAN, LEONARD NAME 7800 RED RD STREET ADDRESS STREET ADDRESS SO MIAMI FL 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-ZIE CITY-ST-ZIP □ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7(P Change ☐ Addition ☐ Delete TITLE THEF NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITI F Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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

FILED