Aug 26, 2004 8:00 am Secretary of State 03-18-2004 90014 041 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

1. Entity Nam	MENT # V35548 REST BUILDERS, INC.				
Principal Place 1872 WENT GREEN COVE		Mailing Address POBOX 1825 GREEN COVE SPRINGS R	L 32043 US	66432627	
2. Principal Place of Business 3712 Clynn Cottage Ct. P.O. Box 18: Suite, Apt. #, etc. Suite, Apt. #, etc.			25	- I (2007) BILDER IND. BILDE GIRK BIRDE? (2	
				08242004 Chg-P	CR2E034 (10/03)
GITY & State GREEN COUR Springs, FL GREEN COURS			peings, FL	59-3128605	Applied For Not Applicable
7.00 3.204	3 Country 1	Zip 32043	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Re			7. Name and Address of New	
	URTIS TWORTH LN OVE SPRINGS, FL 32043		STIA GI	(P.O. Box Number is Not Acceptab	() FL Zip Code 43
	named entity-submits this statement for t	he purpose of changing its re	gistered office or registe		
the obligat	ions of registered agent			•	عا براج
SIGNATURE	Signature, typed or printed name of registered agent end	CURTS -	HAMES PR	d when reinstating)	716104
	LE NOW!!! FEE IS \$550.00 ue by September 8, 2004	9. Election Campaign Trust Fund Contrib		5.00 May Be ded to Fees	
10.	OFFICERS AND D	IRECTORS Delete	11.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 11 Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	JAMES, C.A. PO BOX 1825 GREEN COVE SPRINGS, FL	Li ociac	NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOLLY, STEVE PO BOX 1825 GREEN COVE SPRINGS, FL	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SKEEN OOVE OF KINGS, TE	☐ Delete	TITLE NAME STREET ADDRESS City-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
indicated of the cor	certify that the information supplied with the on this report or supplemental report is to poration or the receiver or trustee empower, or on an attachment with an address, with the position of the properties of the proper	rue and accurate and that my rered to execute this report as	signature shall have the	same legal effect as if made under	roath; that I am an officer or director
SIGNAT	URE:	NTED NAME OF SIGNING OFFICER OR	DIRECTOR	31610	904-28H-2595 Daytime Phone #
					,

66432627

1322 AS

Gold Crest Builders, Inc. P.O. Box 1825 Green Cove

24 August 2004

The following is a correct copy of the Annual report.

One was sent to you on March 16, 2004 with a check for \$150.

It was not correctly signed and returned to Gold Crest.

A second letter was sent, but not received, so a notice of intent to dissolve was sent.

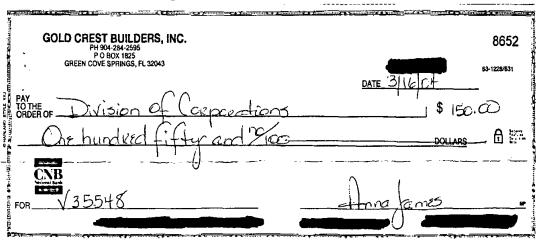
Attached is a copy of the front and back of the check # 8652.

Thank you,

Curtis James

This printout is proprietary and should not be distributed $\sqrt{35548}$

66432627



Serial# Post Date Amount(\$) 8652 03/24/2004 150.00

