


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23 2004 08:00 AM
Secretary of State

DOCUMENT # V67940
 1. Entity Name
 EASTON CONSTRUCTION COMPANY, INC.



Principal Place of Business Mailing Address
 10165 N.W. 19 STREET 10165 N.W. 19 STREET
 MIAMI, FL 33172 MIAMI, FL 33172

DO NOT WRITE IN THIS SPACE



01202004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 65-0363437 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 EASTON, EDWARD W
 10165 N.W. 19 STREET
 MIAMI, FL 33172

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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 _____ (NOTE Registered Agent signature required when re-stating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00 ✓
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

1100000063892
 02/23/04-80179-016 158.75

10. OFFICERS AND DIRECTORS

TITLE	CDP
NAME	EASTON, EDWARD W.
STREET ADDRESS	10165 N.W. 19 STREET
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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I hereby 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward W. Easton EDWARD W. EASTON 2/20/04 (305) 593-2222
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #