## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 23, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # V71803 CONSTRUCTION & RESTOR	RATION, INC.			Total y of State
`	ce of Business KING, JR. BLVD 33603	Mailing Address 912 W. M.L. KING, JR. BLVD TAMPA, FL 33603			(XIII 1878)) Natoria etnik nivera niverana ili 1800)
DO NOT WRITE IN THIS SPACE  8. Name and Address of Current Registered Agent				04132005 No Chg-P  4. FEI Number 59-3147513  5. Certificate of Status Desired	CR2E034 (10/03)  Applied For Not Applicable  \$8.75 Additional Fee Required
SIERRA, PAUL J 7208 SPRING VALLEY DRIVE TAMPA, FL 33615			DO NOT WRITE IN THIS SPACE		
	named entity submits this statement for tilons of registered agent.	he purpose of changing its registers			da. I am famillar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and site if applicable. (NOTE. Registered Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees U00000325152  104/23/05-80035-004 158.75					25152 0005-004_158.75
TITLE NAME STREET ABORESS CITY-ST-ZIP TITLE	OFFICERS AND DI PD SIERRA, PÂUL J. 912 W. M.L. KING JR BLVD TAMPA, FL	RECTORS 3			
NAME STREET ADDRESS CITY-ST-ZIP	SIERRA, ELISE A. 912 W. M.L. KING JR BLVD TAMPA, FL				
TITLE NAME STREET ADDRESS CITY - ST - ZIP				DO NOT WE	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			, <del></del>	IN THIS SPA	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. It hereby certify that the information supplied with this filling 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 poster 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: PAUL J SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAIS DAIS DAIS DAIS DAIS DAIS DAIS DAIS					