

2004 FOR PROFIT CORPORATION ANNUAL REPORT

02-11-2004 90024 004 ***158.75

DOCUMENT # V72710

1. Entity Name
PINNACLE CONSTRUCTION OF FORT LAUDERDALE, INC.



2. Principal Place of Business
 2715 F OAKLAN PARK BLVD
 SUITE 201
 FT LAUDERDALE, FL 33306 US

3. Mailing Address
 3706 N. OCEAN BLVD.
 SUITE 460
 FT. LAUDERDALE, FL 33308

54004847



02092004 Chg-P CR2F014 (10/03)

2. Principal Place of Business

3. Mailing Address

State Abb. #, etc.

State Abb. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Filing Number
65-0376370

Annual Report Due

5. Total Number of Shares Issued



\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LESOUSKY, JOHN
 3706 N. OCEAN BLVD.
 SUITE 460
 FT LAUDERDALE, FL 33308

Name
 Street Address (P.O. Box Number if Not Applicable)
 City

FL

8. The undersigned hereby certifies this statement for the purpose of complying with the provisions of Chapter 190, Florida Statutes, relating to the filing of this report with the Secretary of State.

SIGNATURE: *John Lesousky*

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

9. The Corporation is a(n) Limited Liability Corporation **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	11. ADDITIONAL REGISTERED OFFICERS AND DIRECTORS
TITLE: <input type="checkbox"/> Director NAME: LESOUSKY, MICHAEL STREET ADDRESS: 3706 N. OCEAN BLVD., STE. 460 CITY, STATE, ZIP: FT LAUDERDALE, FL	<input type="checkbox"/> Director NAME: PROF. JOHN LESOUSKY STREET ADDRESS: 3706 N. OCEAN BLVD SUITE 460 CITY, STATE, ZIP: FT. LAUDERDALE FLA. 33308
TITLE: <input type="checkbox"/> Director NAME: LESOUSKY, JOHN STREET ADDRESS: 3706 N. OCEAN BLVD., STE. 460 CITY, STATE, ZIP: FT LAUDERDALE, FL	<input type="checkbox"/> Director NAME: V.P. DAVID LESOUSKY STREET ADDRESS: 3706 N. OCEAN BLVD SUITE 460 CITY, STATE, ZIP: FT LAUD. FLA. 33308
TITLE: <input type="checkbox"/> Director NAME: S LESOUSKY, JOHN STREET ADDRESS: 3706 N. OCEAN BLVD., STE. 460 CITY, STATE, ZIP: FT LAUDERDALE, FL	<input type="checkbox"/> Director NAME: _____ STREET ADDRESS: _____ CITY, STATE, ZIP: _____
TITLE: <input type="checkbox"/> Director NAME: _____ STREET ADDRESS: _____ CITY, STATE, ZIP: _____	<input type="checkbox"/> Director NAME: _____ STREET ADDRESS: _____ CITY, STATE, ZIP: _____
TITLE: <input type="checkbox"/> Director NAME: _____ STREET ADDRESS: _____ CITY, STATE, ZIP: _____	<input type="checkbox"/> Director NAME: _____ STREET ADDRESS: _____ CITY, STATE, ZIP: _____

12. I hereby certify that the information furnished with this filing does not qualify for the exemption stated in Section 190.02(6)(b), Florida Statutes, further certified that the information indicated on this report or any amendment thereto by true and accurate and that my signature does have the same legal effect as if made under oath that I am as of the date of the completion of the report or further amendment thereto the president or a director of the corporation and that my name appears in Book 10 of Book 11 of Chapter 190 of the Florida Statutes, and that my name appears in Book 10 of Book 11 of Chapter 190 of the Florida Statutes.

SIGNATURE: *Michael Lesousky* *John Lesousky*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR