



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 119796		2. Name of Corporation HALEY CONSTRUCTION, INC.			
3. Street Address Principal Business Office 900 ORANGE AVE		City DAYTONA Bch		State FLORIDA	Zip 32114
4. Business Phone No. 386 944 0470		5. State of Incorporation FLORIDA			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island TO BUILD A RESTAURANT.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DAN HALEY			Vice President Name Phillip HALEY		
Street Address 900 ORANGE AVE			Street Address 900 ORANGE AVE		
City DAYTONA Bch	State FLORIDA	Zip 32114	City DAYTONA Bch	State FLORIDA	Zip 32114
Secretary Name Theresa HALEY			Treasurer Name		
Street Address 900 ORANGE AVE			Street Address		
City DAYTONA Bch	State FLORIDA	Zip 32114	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name DAN HALEY			Director Name		
Street Address 900 ORANGE AVE			Street Address		
City DAYTONA Bch	State FLORIDA	Zip 32114	City	State	Zip
Director Name Phillip HALEY			Director Name		
Street Address 900 ORANGE AVE			Street Address		
City DAYTONA Bch	State FL	Zip 32114	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
7,000 COMM \$1.00 PAR VALUE			900	Common	1.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



119796

File Date	1/18/04
Check No.	125708
By:	DA
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Date

DAN HALEY

Print or Type Name of Officer

PRESIDENT

Title of Officer

1-13-05



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Matthew A. Brown, Secretary of State

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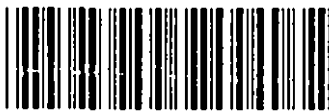
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 119796		2. Name of Corporation HALEY CONSTRUCTION, INC.			
3. Street Address Principal Business Office 900 ORANGE AVENUE		City DAYTONA Bch	State FLORIDA		
4. Business Phone No. 386 944 0420		5. State of Incorporation FLORIDA	6. SIC Code		
7. Brief Description of the Character of Business Conducted in Rhode Island TO BUILD A RESTAURANT.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DAN HALEY		Vice President Name Phillip HALEY			
Street Address 900 ORANGE AVE		Street Address 900 ORANGE AVE			
City DAYTONA Bch	State FLORIDA	City DAYTONA Bch	State FLORIDA		
Zip 32114		Zip 32114			
Secretary Name TERESA HALEY		Treasurer Name			
Street Address 900 ORANGE AVENUE		Street Address			
City DAYTONA Bch	State FLORIDA	City	State		
Zip 32114		Zip			
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name DAN HALEY		Director Name			
Street Address 900 ORANGE AVE		Street Address			
City DAYTONA Bch	State FLORIDA	City	State		
Zip 32114		Zip			
Director Name Phillip HALEY		Director Name			
Street Address 900 ORANGE AVE		Street Address			
City DAYTONA Bch	State FLORIDA	City	State		
Zip 32114		Zip			
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐		11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐			
AUTHORIZED SHARES		ISSUED SHARES			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
7,000 COMM \$1.00 PAR VALUE			900	Common	1.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 1 9 7 9 6 *

File Date	6-29-04
Check No.	123028
By:	10P
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer DANIEL H HALEY Date 5-12-04
Print or Type Name of Officer
Title of Officer PRESIDENT



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 119796 2. Name of Corporation HALEY CONSTRUCTION, INC.

3. Street Address Principal Business Office 900 ORANGE AVE City DAYTONA Bch State FL Zip 32114

4. Business Phone No. 386 944 0470 5. State of Incorporation FLORIDA

7. Brief Description of the Character of Business Conducted in Rhode Island GENERAL CONSTRUCTION (COMMERCIAL)

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name <u>DAN HALEY</u>	Vice President Name <u>PHILLIP HALEY</u>
Street Address <u>900 ORANGE AVE</u>	Street Address <u>900 ORANGE AVE</u>
City <u>DAYTONA Bch</u> State <u>FL</u> Zip <u>32114</u>	City <u>DAYTONA Bch</u> State <u>FL</u> Zip <u>32114</u>

Secretary Name <u>THORASA HALEY</u>	Treasurer Name
Street Address <u>900 ORANGE AVENUE</u>	Street Address
City <u>DAYTONA Bch</u> State <u>FL</u> Zip <u>32114</u>	City State Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name <u>DANIEL H HALEY</u>	Director Name
Street Address <u>900 ORANGE AVENUE</u>	Street Address
City <u>DAYTONA Bch</u> State <u>FL</u> Zip <u>32114</u>	City State Zip
Director Name <u>PHILLIP HALEY</u>	Director Name
Street Address <u>900 ORANGE AVENUE</u>	Street Address
City <u>DAYTONA Bch</u> State <u>FL</u> Zip <u>32114</u>	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
<u>7,000 COMM</u>	<u>\$1.00</u>	<u>PAR VALUE</u>

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<u>900 Common</u>	<u>Common</u>	<u>1.00</u>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 1 9 7 9 6 *

File Date: 3-17-03

Check No.: 118737

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer [Signature] Date 1-30-03

Print or Type Name of Officer DANIEL H HALEY

Title of Officer PRESIDENT



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AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 119796
2. Name of Corporation HALEY CONSTRUCTION, INC.
3. Street Address Principal Business Office
900 ORANGE AVENUE
4. Business Phone No. 386-944-0470 5. State of Incorporation FLORIDA
7. Brief Description of the Character of Business Conducted in Rhode Island
CONSTRUCTION

City DAYTONA Bch State FLORIDA Zip 32114
6. SIC Code

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name DAN H HALEY
Street Address 15 GRANVILLE CR
City DAYTONA Bch State FL Zip 31118
Secretary Name THERESA HALEY
Street Address 15 GRANVILLE CR
City DAYTONA Bch State FL Zip 31118

Vice President Name NONE
Street Address
City State Zip
Treasurer Name NONE
Street Address
City State Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name DAN H HALEY
Street Address 15 GRANVILLE CR
City DAYTONA Bch State FL Zip 31118
Director Name THERESA HALEY
Street Address 15 GRANVILLE CR
City DAYTONA Bch State FL Zip 31118

Director Name
Street Address
City State Zip
Director Name
Street Address
City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares 7,000 COMM \$1.00 PAR VALUE Class/Series Par Value

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares 1500 Class/Series Common Par Value 1.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 1 9 7 9 6 *

1-24-02

File Date: 1-24-02

Check No.: 115622

By: De

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer DAN H HALEY Date 1-18-02

Print or Type Name of Officer DAN H HALEY

Title of Officer President