2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 16, 2004 08:00 AM DOCUMENT # J05117 **Secretary of State** WAGLER REMODELING COMPANY, INC. Principal Place of Business Mailing Address 256 VIC EDWARDS RD 256 VIC EDWARDS RD SARASOTA, FL 34240 US SARASOTA, FL 34240 US 04132004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2660013 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WAGLER, JOSEPH W. DO NOT WRITE 256 VIC EDWARDS ROAD SARASOTA, FL 34240 IN THIS SPACE 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, Signatum, typed or printed name of registered agent and site it applicable. (NOTE. Registered Agant signature required when reinstating) DATE U00000115490 04/16/04-80025-020 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. mif WAGLER, JOSEPH W. NAME STREET ADDRESS 256 VIC EDWARDS RD CITY-ST-7IP SARASOTA, FL 34240 me NAME WAGLER, KATHY D. STREET ADDRESS 256 VIC EDWARDS RD CITY-ST-ZIP SARASOTA, FL 34240 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP mu IN THIS SPACE NUE STREET ADDRESS CITY-ST-ZIP MIE NWE STREET ADDRESS CITY-ST-ZIP MIE NAALE

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, if 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:

STREET ADDRESS CITY+ST-ZIP

SIGNATURE AND TYPED OR PRINTED WANTE OF SIGNING OFFICER OR DIRECTOR

Joseph W. Wagler

4-12-04 (94)-924-672

FILED