2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 13, 2005 08:00 AM **DOCUMENT # J70425 Secretary of State** 1. Entity Name ASSURED INTERIOR BUILDING SYSTEMS, INC. Principal Place of Business Mailing Address C/O GEORGE G. WITTE C/O GEORGE G. WITTE 57,14 JASON LEE PLACE 5714 JASON LEE PLACE SARASOTA, FL 34233-0427 SARASOTA, FL 34233-0427 01062005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2782222 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent WITTE, GEORGE G. DO NOT WRITE 31 INLETS BOULEVARD NOKOMIS, FL 34275 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. SIGNATURE_ Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS 10. TITLE VS WITTE, GEORGE G. 31 INLETS BLVD. STREET ADDRESS CITY-ST-ZIP NOKOMIS, FL PT TITLE COURTS, GEORGE T. NAME STREET ADDRESS 512 BAYVIEW AVE. U00000179935 01/13/05-80038-010 150.00 CITY-ST-7IP OSPREY, FL AS TITLE COURTS, ELIZABETH C. NAME STREET ADDRESS 512 BAYVIEW AVE. DO NOT WRITE CITY-ST-ZIP OSPREY, FL TITLE AT

IN THIS SPACE

12. I 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 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 a left in the empowered.

SIGNATURE:

NAME

TITLE NAME STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

WITTE, PAMELA S.

31 INLETS BLVD.

NOKOMIS, FL

WITTE

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