2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000106800

City-St-Zip:

MIAMI, FL 33135

FILED Sep 08, 2004 Secretary of State

				,	
Entity Name: WEST PALM INSTALLERS, INC.					
Current Principal Place of Business:			New Principal Place of	of Business:	
8205 LAKE BLD A, AP MIAMI, FL	Г. #208				
Current Mailing Address:			New Mailing Address	:	
8205 LAKE BLD A, AP MIAMI, FL	Γ. #208				
FEI Number:	65-1054925	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
MONTALVO, LUIS A 3220 SW 4TH MIAMI, FL 33135			MONTALVO, LUIS A 8205 LAKE DRIVE BLDG A APT.#208 MIAMI, FL 33166	8205 LAKE ÓRIVE BLDG A APT.#208	
The above in the State		submits this statement for the pu	rpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: LUIS ALEJANDRO MOANTALVO				09/08/2004	
	Electro	nic Signature of Registered Ager	nt	Date	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (MONTALVO, L 3220 SW 4TH MIAMI, FL 33	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (MONTALVO, E 3220 SW 4TH MIAMI, FL 33	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	S (MONTALVO, A 3220 SW 4TH		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: LUIS ALEJANDRO MONTALVO P 09/08/2004