FOR PROFIT CORPORATION HEORM RUSINESS REPORT (UBR)

FILED May 28, 2002 8:00 am f State

Applied For Not Applicable

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DOCUMENT # 447004 1. Entity Name ALUMA TRIM, INC.			2002	Secretary of Sta	
	NOT WRIT	TE IN THIS	SPACE		
2. Principal Place of B	Business	3. Mailing Addres	s		
177 N. Goldenrod Suite, Apt. #, etc.		Same Suite, Apt. #, etc.		DO NOT WRITE IN	THIS SPACE
Orlando, City & State	F1	City & State		4. FEI Number 59-1521841	Applied F Not Appli
Zip 32807	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
32007		<u> </u>		7. Name and Address of Current Regi	stered Agent
			Name	OMENDEDCED BADBADA	

DO NOT WRITE IN THIS SPACE

Name			
	ROTENBERGER,	BARBARA	
	ddress (P.O. Box Number is N		

2304 Chinook Trail Zip Code FL 32751 Maitland, Fl.

SIGNATURE		
Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE

January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be

After May 1, Fee is \$550.00 Tax filing requirement and elects to do so. Amended UBR is \$61.25

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.

Trust Fund Contribution. Added to Fees

(See criter	ia on back)	Ц	Make Check Payable	to Department	of State	
11.	OFFICE	S AND DIF	ECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROTENBERGER, 2304 CHINOOK MAITLAND, FL	TRAI		NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST BARBARA ROTE 2304 CHINOOK MAITLAND, FL	NBERG TRAI		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JONES, JEFFR 7631 LODGE P	EY OLE T	RAIL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	د د د د د د د د د د د د د د د د د د د	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WINTER PARK, V BRIAN ROTENB	ERGER DRIVE		TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WINTER PARK,	FL		TITLE .NAME .STREET ADDRESS .CITY-ST-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP				TITLE NAME STREET ADDRESS CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing 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 11 or on an attachment with an address, with all other like empowered

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

signing officer or director

Barbara Rotenberger