2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 28, 2008 08:00 AM Secretary of State **DOCUMENT #654067 ACTION INDUSTRIES, INC.** Principal Place of Business Mailing Address 3602 NE 70TH ST 3602 NE 70TH ST OCALA, FL 34479 OCALA, FL 34479 US 01172008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1967778 \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent GARY, LEON DO NOT WRITE 3602 N E 70TH \$T OCALA, FL 34479 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be U00000803425 02/05/08-80025-002 150.00 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME GARY, LEON 3602 NORTHEAST 70TH ST STREET ADDRESS CITY-ST-ZIP OCALA, FL 34479 TITLE GARY, REBECCA NAME STREET ADDRESS 3602 NORTHEAST 70TH ST CITY-ST-ZIP OCALA, FL 34479 TITLE GARY, ERIC L. NAME STREET ADDRESS 3504 SOUTHEAST 33RD CT DO NOT WRITE CITY-ST-ZIP OCALA, FL 34471 IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR