

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 849181

FILED
Jul 05, 2005
Secretary of State

Entity Name: ALLIED BUILDING CRAFTS, INC.

Current Principal Place of Business:

9600 W BRYN MAWR
SUITE 600
ROSEMONT, IL 60018

New Principal Place of Business:

Current Mailing Address:

9600 W BRYN MAWR
SUITE 600
ROSEMONT, IL 60018

New Mailing Address:

FEI Number: 36-3042983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REISMAN, STEPHEN H
1 S.E. 3RD AVENUE
SUITE 3050
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

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:

Title: AS () Delete
Name: DEMOS, JAMES T.
Address: 9600 W BRYN MAWR SUITE 600
City-St-Zip: ROSEMONT, IL 60018

Title: D () Delete
Name: GOLDTEIN, GAIL,
Address: 1111 CROFTON
City-St-Zip: HIGHLAND PARK, IL 60035

Title: AS () Delete
Name: BRADY, PATRICIA
Address: 9600 W BRYN MAWR SUITE 600
City-St-Zip: ROSEMONT, IL 60018

Title: PSTD () Delete
Name: MARTIN, RICHARD JR
Address: 25175 JEFFERSON AVE
City-St-Zip: MURRIETA, CA 92563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: PATRICIA BRADY

AS

07/05/2005

Electronic Signature of Signing Officer or Director

Date