

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90413 011 ***150.00

DOCUMENT # F05000003563 1. Entity Name CUSTOM BUILDING PRODUCTS, INC.					
Principal Place of Business 13001 SEAL BEACH BLVD., SECOND FLOOR SEAL BEACH, CA 90740			Mailing Address 13001 SEAL BEACH BLVD., SECOND FLOOR SEAL BEACH, CA 90740		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 95-2400847	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PECK, THOMAS R II <input type="checkbox"/> Delete 13001 SEAL BEACH BLVD., SECOND FLOOR SEAL BEACH, CA 90740		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EP MCMULLEN, JOHN <input type="checkbox"/> Delete 13001 SEAL BCH BLVD SEAL BEACH, CA 90740		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WEBER, ROLAND JR <input type="checkbox"/> Delete 13001 SEAL BCH BLVD SEAL BEACH, CA 90740		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOS KUHNS, DONALD L <input checked="" type="checkbox"/> Delete 13001 SEAL BEACH BLVD., SECOND FLOOR SEAL BEACH, CA 90740		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPFS KUHNS, DONADL L <input type="checkbox"/> Delete 13001 SEA BCH BLVD SEAL BEACH, CA 90740		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPC BLOOME, CHARLES <input type="checkbox"/> Delete 13001 SEAL BCH BLVD SEAL BEACH, CA 90740		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO/EVP BLOOME, CHARLES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13001 SEAL BEACH BLVD SEAL BEACH, CA 90740	
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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>DK Kuhns</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: 4/23/07 Daytime Phone #		