2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 12, 2004 08:00 AM Secretary of State DOCUMENT # F63996 1. Entity Name SUN CONTROL ALUMINUM & REMODELING CO., INC. Principal Place of Business Mailing Address 4424 DEL PRADO BLVD 4424 DEL PRADO BLVD CAPE CORAL, FL 33914 CAPE CORAL, FL 33914 US 01242004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2149821 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPECTOR, HAROLD DO NOT WRITE 4424 DEL PRADO BLVD CAPE CORAL, FL 33914 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 Signature, typed or printed name of registered agent and atte if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Uüüüüüüasna5 Trust Fund Contribution. Added to Fees 03/12/04-80010-015 15n.m OFFICERS AND DIRECTORS 10. TITLE NAME SPECTOR, HAROLD STREET ADDRESS 1300 RIO VISTA CITY-ST-ZIP FORT MYERS, FL 33901 TITLE SPECTOR, ANITA NAME STREET ADDRESS 1300 RIO VISTA CITY - ST - ZIP FORT MYERS, FL 33901 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE 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 exemption stated in Section 119 07(3)(i), Florida Statutes, I further certify that the information indicated on this report or supplemental port 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 of this table 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 attachmer

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

FILED