| PROFIT CORPORATION (Supplemental Corporation ANNUAL REPORT (Supplemental Corporation Annual Report (Supplemental Corporation Name Annual Corporation Name Annual Corporation Name Annual Corporation Name (Supplemental Corporation Name Annual Corporation Name Annual Corporation Name Annual Corporation Name (Name Name Name Name Name Name Name Name   | FILE N  | OW: FILING FEE  | AFTER MAY   | 1 IS \$550.00  |   | FILE   | D                                 |
|--|---|---|---|--|---|--|-----------------------------------|
| DOCUMENT # F9700003508 . Cooperation Name ARROCRAFT SHEET METAL SPECIALISTS, INC.  Protoget Fluca of Business  Mailing Address    1. Date incorporated or Clustified   3a. Date of Leaf Report   7/1/97   2. Date   7/1/97   2. Date   7/1/97   3. Date   7/1/97   3 | CORP  | PORATION<br>AL REPORT   | Sandr   | a B. Mortham   | 1 ~   |  |                                   |
| Principal Place of Business    1. Data incorporated or Qualified   3a. Data of Last Report   7/7/97   3. Data incorporated or Qualified   3a. Data of Last Report   7/7/97   3a. Data incorporated or Qualified   3a. Data of Last Report   7/7/97   3a. Data incorporated or Qualified   3a. Data of Last Report   7/7/97   7a. Data of La | DOCUN   | MENT # F9700000   | 3508  |  | Sec   | retary (   | oi Stau                           |
| 1. Profosion Press and Address of Current Registered Agent  1. Press and Address of Current Registered Agent  1. Press and Address of Current Registered Agent  1. Street Address (P.O. Box Number is Not Acceptable)  1. Street Address of Current Registered Agent  1. Street Address (P.O. Box Number is Not Acceptable)  1. Street Address of New Registered Agent  1. Street Address (P.O. Box Number is Not Acceptable)  1. Street Address (P.O. Box Number i |   |   |   |  |   |  |                                   |
| Englishing of Business   According to the provision of Section 807 0502 and 507 5008, Florida Statutes, the above named corporation submits this statement for the purpose of changing agent as registered agent and site of spokates.  Englishing with and accept the obligations of Section 807 0502 and 507 5008, Florida Statutes, the above named corporation submits this statement for the purpose of changing the registered agent and site of spokates.  Englishing with and accept the obligations of Section 807 0502 and 507 1500, Florida Statutes, the above named corporation submits this statement for the purpose of changing the registered agent all manifest with, and accept the obligations of Section 807 0505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent at an familiar with, and accept the obligations of Section 807 0502, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent at an familiar with, and accept the obligations of, Section 807 0505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent at an familiar with, and accept the obligations of, Section 807 0505, Florida Statutes, the above named corporations bushmits this statement for the purpose of changing its registered agent at an familiar with, and accept the obligations of, Section 807 0505, Florida Statutes, the above named corporations submits this statement for the purpose of changing its registered agent at an familiar with, and accept the obligations of, Section 807 0505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent at an familiar with, and accept the obligations of, Section 807, 1500, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent at an familiar with, and accept the obligations of, Section 807, 1500, Florida Statut |   |   |   |  |   | led 3a. Date of Las                              | t Report                          |
| Solle, Apt. #. etc.    Solle, Apt. #. etc.   37   30   30   30   30   30   30   30   | 2. Principal Plac                                 | e of Business   | 2a. Malling Address   | 006  | 4. FEI Number   |  |                                   |
| State   Stat   | <u>'l                                      </u>   |   |   | 906  | 38-3199380  |  |                                   |
| State   Stat   | 2]  |   | 27  |  |   | <u> </u>   | Fee Required                      |
| 219   29   34 112   25   29   34 9 2 0 4   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation has liability for intemplate its under s. 196.032.   30   JACKSON   5. This copporation should have some some liability for intemplate its under s. 196.032.   30   JACKSON   3   | Civastate<br>3 Naple:                             | s, FL   | City & State  Za Jackson,                                       | Mi   | 1 7   | ·  |                                   |
| 8. Name and Address of Current Registered Agent  Robert J. Phelps 2255 Linwood Avenue Naples, FL 34112  83  84 City  FL 86 Zip Code  6. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this attainment for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, an installar with, and accept the obligations of Section 607.0506, Florida Statutes, the above-named corporation submits this attainment for the purpose of changing its registered agent, an installar with, and accept the obligations of Section 607.0506, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and site if applicable.  (NOTE Registered Agent signature required when revertating)  DATE  Pres. Sec Vy, & Treas.   Delete   11 Title     Change   Addition    I AMME   Delete   21 Title     Change   Addition    MERCHADORS   13 STREET ADDRESS   14 Title     Change   Addition    MERCHADORS   14 Title   Change   Addition    MERCHADORS   14 Title   Change   Addition    MERCHADORS   14 Title   Change   Addition    MERCHADORS   14 Title   Change   Addition    MERCHADORS   14 Title   Change   Ad | Zip   | Country   | Ziρ   | Country  | 8. This corporation has liability                                 | y for intangible tax ur                          |                                   |
| Robert J. Phelps 2255 Linwood Avenue Naples, FI. 34112  84 City FL 85 City FL 86 City FL |   | <del></del>   | <del> </del>  | 30 JACKSON   |   | <u> </u>   |                                   |
| 2255 Linwood Avenue Naples, FL 34112  83  84 City  FL 85 Zip Code  I. Pursuanto the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this atatement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 67.0505, Floridas Statutes.  1. Pursuantio the provisions of Sections 607.0502 and 607.1508, Floridas Statutes as authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and familiar with, and accept the obligations of, Section 67.0505, Floridas Statutes.  1. Spotium, typed or printed name of registered agent and time if applicable.  2. OFFICERS AND DIRECTORS  2. OFFICERS AND DIRECTORS  3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  1. STAME  2. Pres. Sec'y, & Treas.  Robert J. Phelps  2. Spotium, typed or printed name of registered agent and time if applicable.  2. OFFICERS AND DIRECTORS IN 12  1. STAME  2. OFFICERS AND DIRECTORS IN 12  1. STAME  2. Spotium, typed or printed name of registered agent and time if applicable in the printed printed agent and time if applicable in the printed agent and time is applicable.  2. OFFICERS AND DIRECTORS IN 12  1. STAME  2. OFFICERS AND DIRECTORS IN 12  1. STAME  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  1. STAME  2. STAME TARGET ADDRESS  1.  |   | or manifest and or outstand   | TO STOCK TO STOCK   | 81 Name  | TO. ITAMIO MITO PROGRAMS OF THESE                                 | Kegisteled Agent                                 |                                   |
| Naples , FL 34112    84   City   |   |   |   | 82 Street Addre  | ess (P.O. Box Number is Not Acc                                   | eptable)   |                                   |
| I. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above narmed corporation submits this statement for the purpose of changing its registered agent of both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  IGNATURE  Sprature, typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  DFILE STATES. DELETE  LITTINE  ROBERT J. Phe 1ps  1.5 Here 20, y. & The 2s.  ILITINE 1.5 Here 20, y. & The 2s.  ILITINE 1.5 Here 20, y. & The 2s.  ILITINE 1.5 Here 20, y. & The 3s.  ILITINE 1.5 H |   |   |   | 83   |   |  | <del>-</del>                      |
| II. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent a marginal raw life, and accept the obligations of, Section 607.0505, Florids Statutes.  HONATURE  Signature, typed or printed name of registered agent and title if applicable.  OFFICIENS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  RESTACTORS.  RESTACTORS.  RESTACTORS.  RESTACTORS.  RESTACTORS.  LITTLE  LIT | napte   | 8, FL J4112   |   | 84 City  |   | 85   | Zip Code                          |
| office or registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent are meritary and accept the obligations of, Section 607.0505, Florida Statutes.  IGNATURE  Signature, typed or printed name of registered agent and tills if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  INTERESTADORES Comment of the state of th |   |   |   |  |   | r <u>L</u>                                       |                                   |
| NE SIME L. Drake MERETADORESS MERETADORESS MY.ST.ZIP  LE ME MERETADORESS MY.ST.ZIP  LE ME ME MERETADORESS MY.ST.ZIP  LE ME M   | IGNATURE  | Signature, typed or printed name of registe   | ered agent and title if applicable.                             | (NOTE: Registered A  |   |  | RECTORS IN 12                     |
| NE WE AND L. Drake ME ALS Jackson St.  Jackson, MI 49204  LE ME ME RETADRESS IY-ST-ZIP  LE ME ME ALS MEETADRESS IN-ST-ZIP  LE ME ME ALS MEETADRESS IY-ST-ZIP  LE ME ME ALS MEETADRESS IN-ST-ZIP  LE ME  LE MEETADRESS IN-ST-ZIP  LE ME  LE MEETADRESS IN-ST-ZIP  LE ME  LE MEETADRESS IN-ST-ZIP  LE MEETADRESS IN- | ME<br>REET ADDRESS                                | Robert J. Phelps<br>2255 Linwood Avenu  |   | 1.2 NAME<br>1.3 STREET ADDRESS                                   |   | Chang  | e Addition                        |
| Addition  REET ADDRESS IY-ST-ZIP  LE    DELETE   | ME<br>REET ADORESS                                | Vice Pres.<br>Jim L. Drake<br>415 S. Jackson St.  |   | 2.2 NAME<br>2.3 STREET ADDRESS                                   |   | [ Chang  |                                   |
| Addition  REET ADDRESS  IT ST - ZIP  DELETE  Change  Addition  Addition  Addition  Addition  Addition  Change  Addition  Addition  Change  Addition  Addition  Change  Addition  Addition  Change  Addition  Change  Addition  Change  Addition  Change  Addition  Addition  Change  Addition  Change  Addition  Change  Addition  Change  Addition  Change  Addition  Change  Addition  Addition  Change  Change  Addition  | WIE<br>REET ADORESS                               |   | DELETE  | 3.2 NAME<br>3.3 STREET ADDRESS                                   |   | [] Chang   | e Addition                        |
| SEET ADDRESS Y-ST-ZIP  LE  DELETE  5.2 NAME 5.3 STREET ADDRESS S.4 CITY-ST-ZIP  LE  CANAME 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS FY-ST-ZIP  LE  CHange  AND Change | ME<br>REET ADORESS                                |   | DELETE  | 4.2 NAME<br>4.3 STREET ADDRESS                                   |   | [ ] Chang  | e Addition                        |
| DELETE  6.1 TITLE 6.2 NAME 8.3 STREET ADDRESS 17- ST-ZIP  1. I do 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 annual report or supplemental annual 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 12 or Block (3 if hanged, or on an attachment with an address.  | NATE<br>TREET ADDRESS                             |   | DELETE  | 5.3 NAME<br>5.3 STREET ADDRESS                                   | 80000<br>-05/15/98  | 252 <b>48</b> 3<br>0101101                       | Addition Addition                 |
| information indicated on this annual report or supplemental annual 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 12 or Block 3 if shanged, or on an attachment with an address.  | ME<br>REET ADDR <b>es</b> s                       |   | DELETE  | 6.2 NAME<br>6.3 STREET ADDRESS                                   |   | ·  | a Andilion                        |
| F // V / V UIII II DI UKE // JII - 103-2004  | information in<br>that I am an o<br>appears in Bi | ndicated on this annual report or sup<br>officer or director of the corporation of<br>lock 12 or Block (3 if changed, or on | plemental annual report is tr<br>or the receiver or trustee emp | ue and accurate and that op-<br>powered to execute this release. | my signature shall have the same port as required by Chapter 607, | e legal effect as If ma<br>Florida Statutes; and | ede under oath;<br>d that my name |

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