## 2006 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT,#F99000006520 1. Entity Name CAROLINA CONDUIT SYSTEMS, INC.

**FILED** Jan 23, 2006 08:00 AN Secretary of State

104 AIRPORT INDUSTRIAL DR 19 STE 101 S		ailing Address 104 AIRPORT INDUSTRIAL DR STE 101 CLAYTON, NC 27520						
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			CE	01112006  4. FEI Numb 56-206  5. Certificate	No Chg-P er 50264 of Status Desired NOT W	CR2E034 (1		
8. The above	named entity submits this statement for the lons of registered agent.	e purpose of changing its register	ed office or re		THIS SP		ar with, and accept	
SIGNATURE	ions or registered agent.  Signature, typed or printed name of registered agent and t	de it applicable. NOTE Registere	id Agent signature n	equired when reinstalling)		DATE	-	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees				
TITLE NAME STREET ADDRESS	OFFICERS AND DIF P STEPHENS, RONNIE 6064 SOUTHEAST 119TH STREET			the amountain with the second				
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	BELLEVIEW, FL 34420 VP PRAET, ROGER VAN 115 BROWARD COVE RD. POMONA PARK, FL 32181			Street, and a st	HOODIL 11.726736-	391453 E0011-018	150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT W			
NAME STREET ADDRESS CITY-ST-ZIP				·- fN	THIS SF	ACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							and decrease of the same of th	
NAME STREET ADDRESS CITY-ST-ZIP							is one view a	

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 aftect as if made under cath; 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR