


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2005 08:00 AM
Secretary of State

DOCUMENT # G14672 1. Entity Name OHRT'S QUALITY ALUMINUM CONSTRUCTION, INC.	
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Principal Place of Business 1515 PROSPECT DR SEBRING, FL 33870 US	Mailing Address 1515 PROSPECT DR SEBRING, FL 33870 US
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DO NOT WRITE IN THIS SPACE



01192005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1568947	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCCOLLUM & JOHNSON PA
129 S COMMERCE AVE
SEBRING, FL 33870

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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 _____ (NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOLYNTJES, JENNIFER A. 1515 PROSPECT SEBRING, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V OHRT, JAMES E. 212 KITE STREET SEBRING, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OHRT, FLORENE L 1700 JERI KAY LANE SEBRING, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SOLYNTJES, THOMAS M 1515 PROSPECT SEBRING, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OHRT, EVERETT R. 1700 JERI KAY LANE SEBRING, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

UD00000205563
01/31/05-80043-017 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Jennifer Solyntjes Jennifer Solyntjes 1-27-05 863-385-2302

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) Date Daytime Phone #