2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H41081

FILED Apr 27, 2006 Secretary of State

Entity Name: ENGINEERED AWNING FRAMES, INC.

urrent P	Principal Place	e of Business:	New Principal Plac	ce of Business:
C/O LOUI: 3905 NW MAMI, FL	31 AVENUE			
Current Mailing Address:		New Mailing Address:		
C/O LOUI 3905 NW MAMI, FL	31 AVENUE			
El Number	: 59-2499200	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of (Current Registered Agent:	Name and Address	s of New Registered Agent:
KING, LOU 1905 NW MIAMI, FL	31 ÁVENUE			
		submits this statement for the r	ourpose of changing its registe	ered office or registered agent, or both,
	e named entity e of Florida.	sabilities this statement for the p	surpose or enanging to region	nou omeo or regions and agent, or bear,
	e of Florida.	Submits this statement for the p	our pood or origing no regions	
n the Stat	e of Florida. RE:	nic Signature of Registered Ag		Date
n the Stat	e of Florida. RE: Electro			
n the State	e of Florida. RE: Electro	nic Signature of Registered Ago	ent	
the State	e of Florida. RE: Electrol mpaign Financin S AND DIREC	nic Signature of Registered Agong Trust Fund Contribution (). CTORS:) Delete 3., VENUE	ent	Date
n the Stati SIGNATU Lection Car DFFICER itle: ame: ddress:	e of Florida. RE: Electron mpaign Financin S AND DIRECT PTD (KING, LOUIS C 3905 NW 31 A MIAMI, FL 331	nic Signature of Registered Agr og Trust Fund Contribution (). CTORS:) Delete 3., VENUE 142) Delete DALE, A, HAM BLVD	ent ADDITIONS/CHAN Title: Name: Address:	Date IGES TO OFFICERS AND DIRECTOR
n the Stati IGNATU Iection Car PFFICER ttle: ame: ddress: ity-St-Zip: ttle: ame: ddress:	e of Florida. RE: Electron mpaign Financin S AND DIRECT PTD (KING, LOUIS C 3905 NW 31 A MIAMI, FL 331 D (DIPERSICO, D 520 NOTTINGH W PALM BEACT SD (CARROLL, JAI 844 NW 9TH A	nic Signature of Registered Agrag Trust Fund Contribution (). CTORS:) Delete 3., VENUE 142) Delete DALE, A, HAM BLVD CH, FL) Delete MES	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	Date IGES TO OFFICERS AND DIRECTOR () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOUIS G. KING PTD 04/27/2006