2005 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 11, 2005 08:00 AM **Secretary of State** DOCUMENT # H73321 1. Entity Name KOPF BUILDERS, INC. Principal Place of Business Mailing Address 420 AVON BELDEN RD 420 AVON BELDEN RD AVON LAKE, OH 44012 AVON LAKE, OH 44012 US 01052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 34-0970922 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 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, typed or printed name of registered agent and title it applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10, TITLE NAME KOPF, H.R. STREET ADDRESS 420 AVON BELDEN ROAD AVON LAKE, OH CITY-ST-ZIP U00000177333 TITLE 01/11/05-80033-019 150.00 EDELSTEIN, BARRY NAME STREET ADDRESS 420 AVON BELDEN ROAD CITY-ST-ZIP AVON LAKE, OH TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET_ADDRESS 1 1 1-20 1 1 House 1 198 X Ber CITY-ST-ZIP TITLE NAME STREET ADDRESS.

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 receive of 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:

DIPPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(440) 933-6908