


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 29, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J54197</b> 1. Entity Name SCREEN BUILDERS, INC.	
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Principal Place of Business 8451 MCALLISTER WAY WEST PALM BEACH, FL 33411-0715	Mailing Address 8451 MCALLISTER WAY WEST PALM BEACH, FL 33411-0715
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  
  
TRIMBLE, JIM  
8451 MCALLISTER WAY  
WEST PALM BEACH, FL 33411

**DO NOT WRITE  
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: Jim Trimble, Pres. DATE: 3/26/04  
(NOTE: Registered Agent signature required when reinstalling)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP TRIMBLE, JIM 324 LAS PALMAS STREET ROYAL PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DEMARCO, ROBERT 14072 PADDOCK DR. W. PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST SONSINI, MICHAEL A. 4664 ISLAND REEF DRIVE WELLINGTON, FL 33467
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/29/04-80050-003 158.75

**DO NOT WRITE  
IN THIS SPACE**

12. I 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 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: Jim Trimble DATE: 3/26/04 DAYTIME PHONE #: 561-793-6029  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR