¹2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 14, 2005 08:00 AM DOCUMENT # J96640 **Secretary of State** 1. Entity Name ACC-U-RATE SHEETMETAL & STEEL FABRICATORS, Principal Place of Business Mailing Address 300 W. GRANT STREET 300 W. GRANT STREET US ORLANDO, FL 32806 ORLANDO, FL 32806 No Chg-P CR2E034 (10/03) 01102005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2862911 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent REICHART, JAMES R. DO NOT WRITE 300 W. GRANT STREET ORLANDO, FL 32806 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE PΠ REICHART, JAMES R. NAME STREET ADDRESS 300 W. GRANT STREET CITY-ST-ZIP ORLANDO, FL 32806 U00000180382 01/14/05-80027-020 150.00 TITLE LINGO, JOHN NAME STREET ADDRESS 997 ORANGE AVENUE OVIEDO, FL 32765 CITY-ST-ZIP 5555. KIENER, KELLY NAME STREET ADDRESS 2616 HAWTHORNE STREET DO NOT WRITE CITY-ST-ZIP ORLANDO, FL 32806 IN THIS SPACE TITLE REICHART, JAMES R NAME STREET ADDRESS 300 N GRANT ST___ CITY-ST-ZIP ORLANDO, FL TITLE NAME STREET ADDRESS 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)(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:

C!TY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/05

107-425-0172

Daylima Phone

FILED